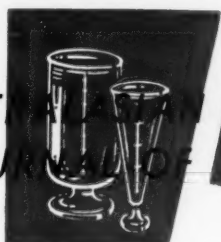


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MAY 30, 1959 New Series: Vol. 40, No. 473 — Old Series: Vol. LXXIV, No. 881

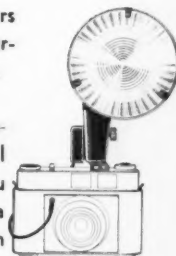
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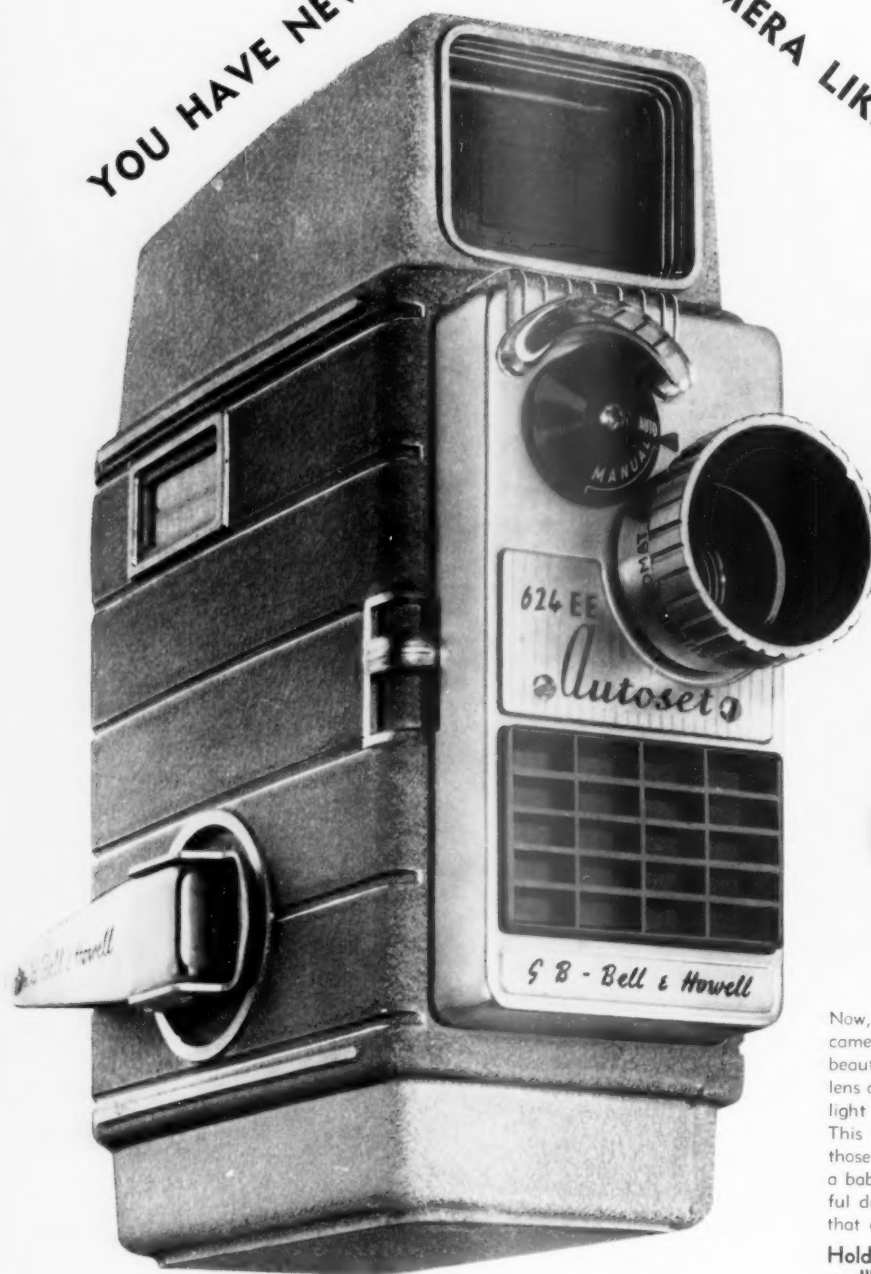
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The Australasian Journal of Pharmacy

With which is incorporated
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PHARMACY BOARD OF VICTORIA

EXAMINATIONS — 1959

Final Examination:

Commences August 31.
Entries close August 10.

Intermediate Examination:

November 2.
Entries close October 12.

By Order of the Board,

F. C. KENT,
Registrar.

360 Swanston Street,
Melbourne.

PHARMACY BOARD OF NEW SOUTH WALES

Pharmacy Qualifying Examination

The next Qualifying Examination will commence at the University of Sydney on Thursday, August 6, 1959.

Time Table

Pharmaceutics I—Thursday, August 6, Afternoon.

Pharmaceutics II—Friday, August 7, Afternoon.

Pharmaceutical Arithmetic—Monday, August 10, Morning.

Prescription Reading and Posology—Monday, August 10, Afternoon.

Practical work commences on Tuesday, August 11.

Entry forms are available from the Board only.

Fee for part or whole of the Examination is £3. 3. 0.

Applications close with the last post on July 3, 1959.

Watch this column for further announcements.

P. E. COSGRAVE,
Registrar.

Fifth Floor,
Winchcombe House,
52 Bridge Street, Sydney.

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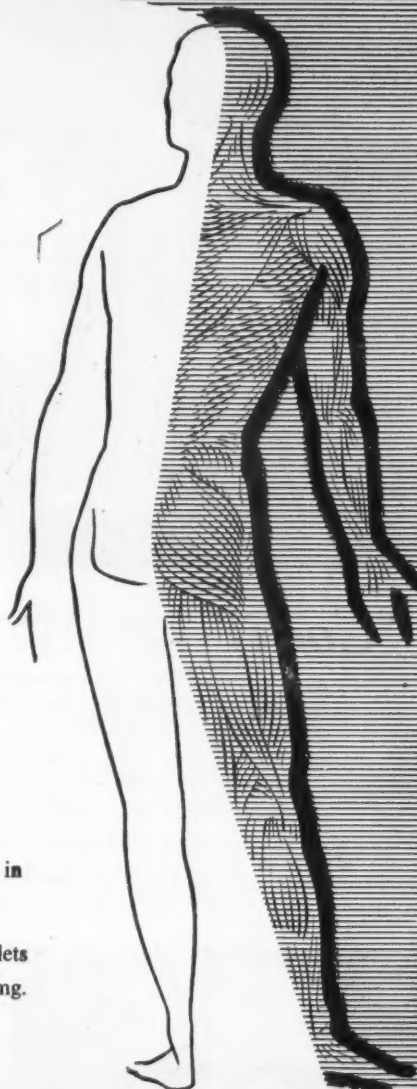
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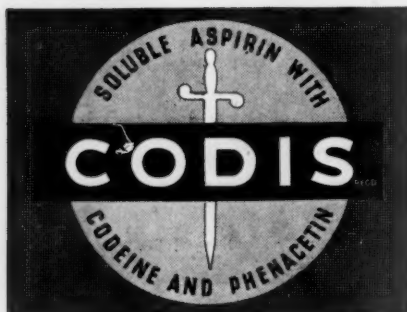
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REFERENCES

- (1) Truelove, S.C., and Morris-Owen, R.M., Brit. Med. J., iii, 1958, 603.
- (2) Calman, R.M., and Murray, J., Brit. Med. J., ii, 1956, 200.



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Apprenticeship or Student Training?

It is a coincidence that at a time when three of the Australian States, Queensland, New South Wales and Victoria are abandoning the apprenticeship system, an analysis of the demerits of that system should be featured in an Editorial article in the "American Journal of Pharmacy."

The Editor of that Journal, Dr. L. F. Tice, is obviously of opinion that the old system of form apprenticeship is out-moded and unsuited to present-day conditions. He says: "It is high time that the profession of pharmacy cast off the antiquated practice and philosophy of apprenticeship. This dates back to the time when it was by apprenticeship only that the pharmacist received his training and, by today's standards, it is an anachronism." He suggests that all boards of pharmacy in the U.S.A. should take a new hard look at the problem. He asserts that Americans still believe in the importance of practical experience and follows with some suggestions:—

1. Practical experience should be in the form of an internship programme.
2. No credit for experience prior to graduation.
3. A uniform requirement of not more than six months' practical experience after graduation.
4. Immediate steps to be taken in all States to amend Pharmacy Acts to make this programme possible.
5. The National Association of Pharmacy Boards to use its influence to stimulate and bring about the acceptance of the programme.

Dr. Tice further urges that some attempts to achieve uniform conditions should be made. He points out that every State has a different idea as to when and how practical experience should be gained. If it be taken before entry to College, he says, it is of very doubtful value and may be mis-used by some persons to obtain apprentice certificates while never intending to study pharmacy. Some States, he points out, give credit for the total experience required on the basis of work in a pharmacy while enrolled in a college, and others still credit only the time during which the student is not actually in college, i.e., during vacation.

No student, he says, can properly appreciate the professional work in a pharmacy until he has completed his professional courses in college. Much of the so-called experience gained in the pharmacy during summer vacations is of doubtful quality. The logical time for this experience to be obtained is after graduation and not "sandwiched" between the college years. He sums up this viewpoint as follows: "A few months of experience after college graduation is many times more meaningful than several times this much experience obtained before the proper foundation is obtained."

Failures at Examinations

One of the reasons advanced for the introduction of a new Pharmacy Course in Queensland was the high percentage of failures at the Final Qualifying Examinations in that State.

That is, of course, only a symptom indicating that somewhere something is not satisfactory. Examinations of records of success or failure in Universities and other institutions indicates that factors other than the type of course may be involved.

The fact remains that educational authorities throughout the world have been worried for a considerable time about these failures.

Some time ago we published an Editorial article dealing with this subject, following which the Pharmacy Board of South Australia pointed out that the percentage of passes at the Final Examination in that State was relatively high.

Figures for 1958 have recently been received from some States, and are summarised below:

	Entries	Passes	Percentage
South Australia ..	33	24	72%
New South Wales ..	220	113	51%
Queensland	68	30	44%
Victoria	106	35	33%

In South Australia there were no complete failures in the examinations, and at the practical dispensing examination 30 out of 33 candidates passed.

The Victorian figures are, in a sense, misleading. In that State the Pharmacy Board is compelled, by legislation, to conduct a final examination every three months.

Failures at the November examination are higher than they should be, but candidates are permitted to represent themselves at subsequent examinations without losing credits, and by the end of the succeeding year 92 per cent. have passed.

The introduction of a full-time Third Year Course followed by practical training, in the three eastern States in 1960, will be closely watched, and it will be interesting to note whether there will be any improvement in the pass rate.

Free Samples—A Physician's View

"Pharmacy International," in its issue, March, 1959, published an informative article on the question of distribution of free samples to medical practitioners. In this article extracts from a report of the American Medical Association on a survey it conducted are quoted.

A report of the findings indicated that samples were

"truly effective" in increasing sales; that more than 70 per cent. of physicians questioned indicated they "sometimes" use samples to test various reactions.

Among some of the other interesting findings the following are quoted:—

Only 36% of samples received are for drugs which the physician has not already prescribed.

40% of the physicians receiving free samples simply throw them out.

More than 50% indicate they would not be disturbed if the practice of giving samples by manufacturers was discontinued entirely.

Only 50% of the physicians questioned said they used samples to evaluate a new drug. The other 50% expressed a preference for literature. 47% declared flatly that other sources of information about new drugs would be more valuable than samples.

Of the samples given by physicians to patients with circulatory system diseases only two out of three were given for the first time. The sample then replaced a sale. Commenting on the findings Pharmacy International points out that in relation to certain diseases one of every three samples handed out by the physician is in substitution for a purchase at the pharmacy. The article continues with a request that pharmaceutical chemists with definite opinions on the sample question express their views on questions such as:

1. Does the practice of giving free samples help or harm business at the prescription counter?
2. Are such samples in the main used by physicians to evaluate drugs or are they largely given to favoured patients to save them money?
3. Do samples become items of commerce in competition with chemists—and if so, to what extent?

A Grossly Libellous Article

A most disparaging article about pharmaceutical chemists was published by "Week End" in its issue dated May 9. Following the preamble headed—"Another revealing article in our series exposing the activities of the shysters who take advantage of their professional qualifications to fleece unsuspecting victims—the rogue chemist" appears the heading "She Paid £25 for his 2/- pills."

Prepared for consumption by a certain class of reader, the grossly misleading allegations contained in it will not seriously influence the minds of intelligent and thoughtful people.

Dope peddling, conspiring to rob the Government, sale of abortifacients at exorbitant rates, and equally pernicious practices are attributed to chemists.

The writer, of course, damns with faint praise, but the emphasis given to alleged wholesale malpractice

is calculated to create the impression that most chemists are guilty. It is unfortunate that there is no legal process readily available against the publishers of such unfair attacks against respected sections of the public.

The article in question is allegedly written by "a Brisbane chemist." We doubt whether any member of the profession with a vestige of self respect or respect for his profession would be associated with such a malicious and defamatory article.

Similar attacks are from time to time made on other professions and on pharmacy in other countries. "The Chemist and Druggist," London, for example, recently referred to undue prominence given to the report of an inquest on a death from poisoning. The caption "Chemists Take More Care says Coronor" created a wrong impression of what had happened. The comment of the "C & D" was that some effective action should be taken to counteract possible effects of damaging publicity. It advocated strongly that one voice representing the whole of a profession should be used. "When many voices speak the chances of a simple, effective and unanimous rejoinder are less than if one central spokesman, perhaps professionally trained in journalistic techniques and etiquettes, is made responsible for press relations," the writer claimed.

"Mission from Australia"

Under this heading "The Pharmaceutical Journal" (U.K.) published the following reference in its issue of May 9:—

"Seeking financial support from the pharmaceutical industry in Britain for the new College of Pharmacy at Melbourne, Victoria, three leading members of Australian pharmacy recently visited England. They were Messrs. Eric Scott, Federal President of the Federated Pharmaceutical Service Guild of Australia and President of the Pharmaceutical Society of Victoria; Mr. Nigel C. Manning, President of the Pharmacy Board of Victoria; and Mr. Keith Attiwill, Federal Director of Public Relations for the Associated Pharmaceutical Organisations of Australia. They left Australia about the beginning of April and called upon the leaders of the pharmaceutical industry in the U.S.A. Their mission arose from the need to obtain additional funds to complete the furnishing and equipping of the £1 million college which is being built in Melbourne to replace the old and inadequate premises.

Mr. Scott, who is an honorary member of the Pharmaceutical Society of Great Britain, spoke briefly at the Council dinner on May 5, in response to the toast "Ladies and Guests." He referred to the close link between the British and Australian Pharmaceutical Societies and spoke warmly of the stimulus given to pharmacy in Australia by the visit in 1957 of Mr. F. W. Adams, Secretary and Registrar of the Society. Mr. Scott and Mr. Attiwill return to Australia by air on May 9. Mr. Manning is staying a fortnight longer to visit the World Health Organisation at Geneva and various pharmacy officials in the United Kingdom."

SCIENCE SECTION



EDITED BY A. T. S. SISSONS R.Sc. F.P.S.

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- Pharmacological Properties of Pempidine
- Advances in Diuretics
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- Seaweed: A Nuisance and a Valuable Chemical

GOOD NIGHT. SLEEP TIGHT

By F. H. Shaw, M.Sc.(Melb.), Ph.D.(Lond.)

Professor of Pharmacology, University of Melbourne

INTRODUCTION

These articles have been written to help the general practitioner and the pharmacist, who is medical guide to so many with minor ailments. To both come numerous patients with all degrees of mental stress, but having a common symptom—insomnia. The underlying cause may be trivial, or it may portend a serious illness. To the sufferer, however, it is never an unimportant incident. And this is probably quite rightly so. The busy doctor must make his diagnosis and in the minor instances placate the patient. In the more serious cases he must draw on his knowledge of medicine, both psychomonic and otherwise. Whatever be his treatment, it will undoubtedly include a "drug." In simple cases the pharmacist can lend his aid, but he will feel more competent to advise if he also has a more thorough knowledge.

It is hoped that within these pages the appropriate pharmacological measures will be displayed to all. Above all the pitfalls and fallacies are exposed. Since the insomnia will differ in cause and degree, so the suitable remedial agent must be chosen carefully.

The layman will also find much of interest and self-help. The language is rarely technical, and any unfamiliar terms introduced are explained in an appendix. Age and disease come to all of us, and with them an accompanying sleeplessness. An understanding of the problem is more than half the cure.

*"Sleep that knits up the ravell'd sleeve of care,
The death of each day's life, sore labour's both,
Balm of hurt minds, great nature's second course,
Chief nourisher in life's feast."*

—Macbeth.

PART ONE

The Nature of Sleep

Sleep is a periodic and reversible physiological function which is necessary for the repair of mental processes, perhaps even of the whole organism. The intellectual faculties may be dimmed after a period of wakefulness of as little as eight hours. Not all brains require a respite so soon; some people are able to work into the small hours without undue fatigue. Many a student with such artificial aids as coffee and a wet towel has worked through till dawn. On reflection he

may have asked himself whether the results were worth the candle.

We do not know what biochemical changes take place in the cells of the central nervous system during sleep which result in a revivifying of the mind. Nevertheless we can be sure that such changes do take place, and this is why the gentle production of sleep is a matter of great urgency. If sleep will not come to bed willingly, then she must be wooed. How such a wooing is to be accomplished will be described later.

The Onset of Sleep

The onset of sleep is heralded by mental retardation which is soon followed by a feeling of fatigue. Such sensation is usually referred to the limbs and the eyelids, but without doubt the harmful effects of sleeplessness are more marked on the mind than the body.

The outstanding features of sleep are

- (a) a raising of the sensory threshold which results in an absence of response to changes in the environment;
- (b) unconsciousness, which may be dispelled by varying degrees of stimulation;
- (c) muscular relaxation;
- (d) suppression of higher cortical activity;
- (e) possibility of dreams.

The passage from the waking state to sleep takes place gradually. One may or may not pass through a state of drowsiness. Motor responses become slow and tone diminishes. Just before sleep there may be several unco-ordinated muscular movements of the limbs. Characteristically the eyelids drop over the eyes, the head nods, the trunk becomes flexed and the arms hang loosely. Relaxation of the soft palate may cause snoring.

Some authorities have stated that in the twilight there is a period of intellectual intuition when great creative ideas may flash into the mind. There would be little physiological evidence to support the conception that the brain is more lucid just before the period of unconsciousness. The onset of sleep is favoured by the suppression of stimuli and the facilitation of muscular relaxation. If muscular restfulness is not possible during sleep, e.g. semi-reclining in an aircraft seat, then sleep is likely to be fitful. Thus silence, darkness, a comfortable temperature and mental composure are conducive to sleep.

Sleep Requirements

The daily requirements of sleep vary with the age and with the individual. The young infant sleeps 20 hours daily. This is gradually reduced until in the seventh year about 10 to 14 hours are required. On the average, adults need seven to nine hours, falling to only five to six in old age.

The sleep cycle is largely a matter of habit. Night workers easily change their sleep rhythm. Some people have acquired the very beneficial habit of taking a "cat nap" of a half to one hour's duration during the day. This custom has much to recommend itself to brain workers.

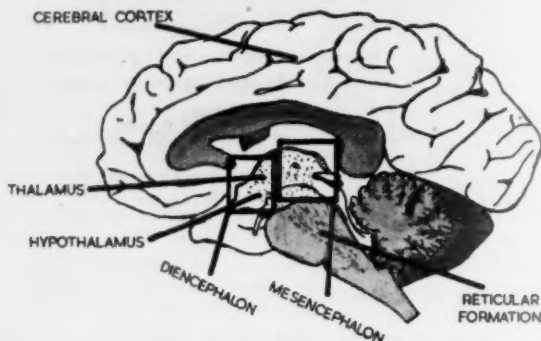


FIGURE 1.

Depth of Sleep

In most adults the depth of sleep increases to a maximum during the first hour and then gradually diminishes until the time of awakening. This was shown by experiments in man in which auditory stimuli were employed to arouse the subject at different times. At about middle age there may be a period of awakening before dawn; after one or two hours the patient falls asleep again (perhaps to awaken late). This may be distressing to the patient, as he may imagine himself to be a victim of insomnia. The treatment of such cases should consist of the kindly advice that such a happening is normal and not a cause for anxiety. The patient may also be prescribed a quick acting but light sedative such as carbromal, to be taken if he should awaken about three to four hours before his normal time of rising. (See Chapter 5.) The barbiturates are too long acting for this purpose. If given a few hours before waking they will either cause the sleeper to oversleep or awake with a hangover.

In sleep, unconsciousness is not uniform for all senses; the depth of sleep is greatest for the sensations of smell and sight, least for those of pain, hearing and touch.

Physiological Changes

Sleep is accompanied by marked changes in both somatic and visceral functions. The latter are less pronounced than the former. Somatic changes include relaxation of muscles, except the reflexors in the hands of young children. There is some tone in the muscles that close the eyes. The sphincters of the rectum and bladder are normally contracted. The eyeballs are turned upward and outward, the pupils are contracted but do not respond to light. In the horse and cow the posture reflexes are not suppressed during sleep, and such animals "sleep on their feet." Abnormal motilities decrease considerably during sleep, e.g. Parkinsonism and hemiplegia. Tendon reflexes diminish and the knee jerk is completely suppressed. Stimulation of the plantar surface of the foot provokes flexion of the toes in light sleep and extension in deep sleep.

Whilst there is great depression in sensory activity, stimuli of an over-riding nature for the well being of the individual will get through, e.g. awakening at the sound of a loud noise, a mother will be aroused when her child stirs.

The blood pressure is reduced by 10 to 30 mm Hg; the lowest level is reached about the fourth hour of slumber. It is not known whether this reduction takes place in hypertensives, or if it does, to what extent. The pulse is also slowed by 10 to 30 beats per minute. The metabolic rate is reduced by 10 to 15 per cent. The respirations are slowed and said to be more costal. The carbon dioxide partial pressure in the alveolar air is slightly higher than when the subject is awake. The urinary output is markedly reduced, perhaps even to half. In common with the raising of the threshold of somatic reflexes the desire to micturate is lessened. Thus on awakening and rising one often experiences an immediate desire to urinate. Digestion proceeds during sleep, especially gastric secretion and movement, but salivary secretion is reduced. There are no significant changes in the concentration of electrolytes in the blood.

Activity of the Brain in Sleep

The activity of the cerebral cortex is diminished in sleep but not totally abolished. The electroencephalograph, by which the "brain waves" or electrical activity of the brain may be measured, shows marked and typical changes. In a somnolent state the rhythm is replaced by a slow rhythm of four to six waves per second. Bursts of waves of progressively increasing and decreasing amplitude at a rate of 14 to 16 per second suddenly appear; these are the "sleep spindles." When the patient is fully asleep only high voltage slow waves are observed. It is interesting to notice that hypnotics and anaesthetics have the same effect on the EEG as sleep. On awakening the opposite changes take place. It is unfortunate that the results obtained by the EEG are too gross to allow us to learn much about sleep or the precise centres involved. It would appear that on falling asleep, and awakening, the whole cortex responds at the same time.

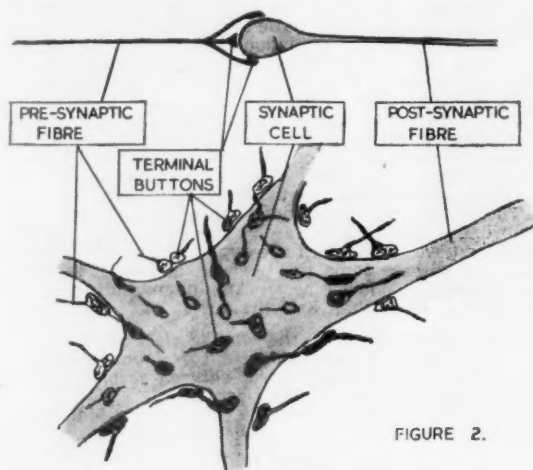


FIGURE 2.

Deprivation

Much work has been done with animals such as dogs. Young animals would appear to be more susceptible than old. Histological changes have been observed in the central nervous system, especially in the cortex, e.g. chromatolysis and shrinkage of cell bodies.

In human experiments subjects have been kept awake for periods ranging from 60 to 114 hours. The knee

jerk remained unaffected, but disappeared when the subject went to sleep, as happens normally. However, a positive Babinski reflex was obtained which suggests a block in the corticospinal pathway. There was little impairment of mental processes, and the reactions to auditory and visual stimuli were prompt, but the subjects were irritable. Attention was sustained only with difficulty. The threshold for pain was lowered, whilst that for touch was unaltered. The maintenance of balance was much impaired, but this was attributed to neuromuscular fatigue rather than labyrinthine dysfunction. Occasionally hallucinations which were sometimes severe enough to resemble schizophrenia occurred. As would be expected, the subjects fell asleep if they were not constantly stimulated. There were no detectable biochemical changes in the blood. Prolonged wakefulness becomes very distressing. The victim gradually loses his ability to think logically and his will power is sapped. These mental responses have enabled clever but unscrupulous modern "inquisitors" both to obtain secrets from their victims and to impart their own ideology. A technique designated "brain-washing" by some apt journalist.

Appendix

1. Atheosis. Degeneration of coats of blood vessels.
2. Autonomic nervous system. That portion of the nervous system which is independent of the central nervous system and therefore the will. It regulates the viscera, ductless glands and blood vessels, etc. It is subdivided into the parasympathetic and sympathetic divisions.
3. Babinski reflex. Stroking the sole of the foot normally produces a turning down of the big toe. In certain cases of damage to the C.N.S. the toe will turn backwards.
4. Carotid sinus. A region in the carotid artery which assists in the regulation of the blood pressure.
5. Cerebral cortex. See Figure 1.
6. Diencephalon. See Figure 1.
7. Electroencephalograph. A record of the electrical activity of the cells of the cortex. An exact explanation of the origin of the waves is lacking. The change in pattern from the normal is indicative of certain types of disease of the brain.
8. Hemiplegia. Paralysis of one side of the body.
9. Hypophysis. Pituitary gland.
10. Hypothalamus. See Figure 1.
11. Internal inhibition. See a discussion of the work of Pavlov in any text book on physiology.
12. Labyrinth. A part of the middle ear.
13. Mesencephalon. See Figure 1.
14. Metabolic rate. The rate at which energy (heat) is produced as the result of the burning of food.
15. Neurone. A nerve cell with all its processes. There is an electrical potential difference across the membrane of the nerve cell, which may be associated with an excess of potassium within the cell. In any active nerve cell the potential disappears and later reverses in sign.
16. Parasympathetic system. See autonomic nervous system.
17. Parkinsonism. Paralysis agitans.
18. Posture reflexes. Our erect position is not maintained by conscious act but reflexly. Impulses leave the muscle, pass to the lower parts of the brain, and back again to those muscles used in standing.
19. Proprioceptor. The apparatus which receives stimuli caused by the actions of the body itself, e.g. our ability to tell if a muscle is in movement.
20. Radioactive "labelling." Certain elements exist in several forms (isotopes) which are chemically identical but which may be distinguished because they are radioactive. Such isotopes may be incorporated in a chemical compound, and the journey of this substance through the body may be "traced" by following the radioactivity, e.g. with a Geiger counter.
21. Reticular formation. See Figure 1.
22. Somatic. Pertaining to the body.

23. Sphincter. A ring-like muscle which closes a natural orifice.

24. Splanchnic region. Of or pertaining to the viscera.

25. Synapse. See Figure 2.

26. Sympathetic system. See autonomic nervous system.

27. Thalamus. See Figure 1.

28. Vaso motor centre. A centre in the medulla which regulates the blood pressure.

29. Visceral functions. Functions appertaining to any large organ in the body, especially to one in the abdomen.

DRUG TREATMENT OF MENTAL ILLNESS

The Pharmaceutical Journal, February 14, 1959, had an editorial with the above title and from this article the following passages are taken:—

Pharmacists will be familiar with a new group of drugs, introduced in recent years, the novel action of which necessitated additions to the pharmacologist's vocabulary. Psycho-pharmacology is a title used to describe the study of the action of drugs on mental behaviour and the drugs that precipitated the establishment of this branch of pharmacology are known variously as *tranquillisers*, indicating their sedative or calming effect without inducing sleep; *ataraxics*, denoting removal of disturbance; or *neuroleptics*, suggesting an effect in reducing the intensity of nerve function. These drugs, which have been known for little more than five years, have already made a formidable impression in the management of severe mental illness. Even so, the history of psycho-pharmacological drugs has just begun, and present results are no more than an indication of what might be expected in the future. The brain, which is their site of action, is more sensitive to changes in the chemical structure of a drug than any other organ; this is illustrated by the profound differences in the intensity of therapeutic action and in the distribution of side-effects which takes place following substitution of the chlorine atom in a chlor-phenothiazine derivative. By such changes a virtually unlimited variety of derivatives can and will be produced, to which can be added the as yet unknown or unrecognised agents. Thus, an armoury is being established ready for the pharmacological attack due to be mounted against mental sickness in the near future.

It is scarcely necessary to emphasise the magnitude of the problem. Figures provided in the most recent annual report of the Chief Medical Officer, relating to England and Wales, indicate that nearly 150,000 patients occupied beds in hospitals approved under the L. & M.T. Acts while almost the same number of persons with mental illness were seen during the year in the out-patient departments. Not shown in these figures are the families and friends of the patients also suffering emotional stress during the illness. In spite of their acknowledged shortcomings the number of patients who have returned to normal society during the brief history of these drugs is greater than with any previous therapeutic régime. In his annual report for 1957 the Chief Medical Officer states, "There is no doubt that the use of tranquillisers has been of great benefit in the mental hospitals and has helped in the treatment of many patients."

While the chemical and pharmacological studies on these drugs must continue relentlessly, it is equally important that their clinical value should be properly evaluated.

According to the report of the Royal Commission on law relating to mental illness the climate of current medical opinion favours treatment away from the hospital, i.e., out-patient and domiciliary. This has

meant heavier demands on the general practitioner who is becoming more familiar and more experienced in handling the mentally sick. Drugs are already making an important contribution to the successful management of these patients; their rôle can be expected to increase in importance with the discovery of new and more potent agents, some with psycho-pharmacological activities hitherto unknown.

PHARMACOLOGICAL PROPERTIES OF PEMPIDINE

S. J. Corne and N. D. Edge. (Brit. J. Pharmacol., 1958, 13, 39.) Pempidine (1:2:2:6:6-pentamethyl-piperidine) is an orally effective, long acting ganglion-blocking agent. In the anaesthetised cat an intravenous injection of pempidine caused, like mecamylamine, a relaxation of the preganglionically stimulated nictitating membrane. The relaxation was slower than with hexamethonium and recovery very prolonged. Pempidine acted specifically at the ganglion and not on the nictitating membrane itself. Large doses did not reduce the output of acetylcholine from the perfused ganglion. In both the anaesthetised cat and the normal mouse pempidine caused mydriasis through its effect on the ciliary ganglion. Doses of 0.05 to 1.0 mg./kg. caused a fall in the cat blood pressure, which developed more slowly than with hexamethonium. Doses up to 10 mg./kg. did not affect the depressor actions of acetylcholine or histamine, but like other ganglionic blocking agents it potentiated the response to adrenaline. A dose of 0.1 mg./kg. abolished the pressor action of nicotine. There was no evidence of histamine release in the atropinised cat, but high doses caused a pressor action, which was not due to adrenaline release. A dose of 0.4 mg./kg. abolished the effect of peripheral vagal stimulation, but not injected acetylcholine. On the isolated rabbit heart a dose of 16 mg. was required to cause cardiac arrest. Smaller doses caused a slowing and decreased amplitude of the beat. Coronary flow increased. In the perfused hind limb of the dog intra-arterial doses of 8 mg. were without effect. Larger doses caused vasodilatation. On the isolated ileum of the guinea pig 800 µg./ml. had little direct effect in most preparations, in others 8 µg./ml. caused a contraction which was abolished by atropine. After 0.8 µg./ml., responses to histamine, pilocarpine, acetylcholine were normal; but the response to nicotine was abolished. Doses of 80 µg./ml. depressed the response to histamine, pilocarpine, acetylcholine and 5-HT. Pempidine inhibited the peristaltic reflex in doses of 1 µg./ml. On skeletal muscle doses of 10 to 40 mg./kg. were required to block the response of the indirectly stimulated tibialis muscle of the cat, the block being curare-like. The anticholinesterase activity *in vitro* was 10⁶ times less than neostigmine. Nicotine induced convulsions in mice were prevented by 0.09 mg./kg.—J. Pharm. Pharmacol., 1959, 3, 186.

ADVANCES IN DIURETICS

By D. P. Carew, Ph.D.

(Abstract from the American Professional Pharmacist, January, 1959.)

Diuretic agents are used in conditions of oedema (sodium retention). The diuretics used may be classified thus:—

Acidifying Diuretics such as ammonium chloride which breaks down to ammonia and hydrochloric acid, the ammonia is excreted as urea and the chloride is excreted together with sodium and water. Disadvan-

tages are gastric irritation and loss of value due to compensation of the acid-base imbalance by the body.

The Xanthines. These are not very potent. Their chief action is dilation of arterioles, causing increased flow of blood through the kidney and therefore increased rate of filtration. Because the rate of filtration increases, there is increased loss of electrolyte (chiefly sodium) at the kidney tubule, and with it corresponding amounts of water.

Xanthines are potentiated by the mercurial diuretics.

Mercurial Diuretics in present use are organic compounds. Inorganic mercury may destroy kidney tissue. Combination with theophylline provides increased effect with decreased local irritation. Mercurial diuretics were generally used intramuscularly. Now the most popular is chloromerdrin, which is quite potent and is effective orally.

The action of mercurial diuretics is by inhibition of certain enzymes in the renal tubule, which are essential for reabsorption. The chloride ion is initially affected and is excreted together with sodium and large amounts of water. These compounds are contraindicated in any cases of kidney damage, and in the occasional mercury-sensitive patient.

Aminouracil derivatives (e.g. Mictine). These compounds differ structurally from all other diuretics. They act by inhibiting reabsorption of sodium and chloride ions in the renal tubules.

Carbonic Anhydrase Inhibitors (Chlorothiazide, Acetazolamide and Ethoxzolamide). Carbonic anhydrase is an enzyme present in several areas of the body, but especially abundant in the proximal tubule of the kidney. This enzyme accelerates the reversible reaction of carbon dioxide plus water to give carbonic acid. Carbonic acid dissociates into hydrogen and bicarbonate ions. The hydrogen ion ties up with buffers such as disodium phosphate and sodium carbonate, replacing the sodium which is re-absorbed from the tubule, together with bicarbonate ions. So that when carbonic anhydrase is inhibited there is less hydrogen available to displace sodium and consequently excretion of sodium, bicarbonate and water, rather than re-absorption, occurs.

These drugs are sulphonamides, without antibacterial action. They are given in a single daily dose to permit diuresis during the day, and adjustment to normal after the acidosis which follows diuresis.

Chlorothiazide acts both like a mercurial and as a carbonic anhydrase inhibitor. It also possesses a unique hypotensive action. Often the dose of a hypotensive drug has to be reduced considerably if chlorothiazide is administered concurrently.

Hydrochlorothiazide is a new, potent diuretic, about ten times as active as chlorothiazide, with no marked side effects. It possesses a gradual hypotensive effect.

Thus the way is open for the development of new diuretics in the near future. With increasing understanding of the mechanisms of action of these compounds there will be increasing effectiveness, and perhaps diuretics with certain desirable secondary effects will become available.—(D.L.)

PERPHENAZINE—A POTENT AND EFFECTIVE ANTIEMETIC

S. C. Wang. (J. Pharmacol., 1958, 123, 306.) Perphenazine (Trilafon), a phenothiazine compound, has been shown to have a potent antiemetic activity. In dogs treated with 0.5 mg./kg. of apomorphine, 0.1 mg./kg.

i. v. prevented vomiting and 0.035 mg./kg. was about the 50 per cent. effective dose. It was therefore about forty-eight times as effective as chlorpromazine. Similarly good protection was given against vomiting induced by morphine sulphate, Hydergine, and also against Lanatoside C where chlorpromazine was ineffective. Against oral emetic doses of 40 mg./kg. of copper sulphate, 0.1 mg./kg. of perphenazine gave 27 per cent protection, comparable with 2.0 mg./kg. of chlorpromazine. It is concluded that the increased potency of perphenazine is related to its greater affinity for the receptors in the trigger zone located in the area postrema.—J. Pharm. Pharmacol., 1959, 3, 186.

BACTERIOLOGICAL STUDY OF OPHTHALMIC OINTMENTS

R. W. V. Wyk and A. E. Granston. (J. Amer. pharm. Ass., Sc. Ed., 1958, 47, 193.) Commercial ophthalmic ointments were examined by the following method. The content of an unused tube of ointment was transferred aseptically to a flask containing 25 ml. of sterile water and a few glass beads. The flask was warmed to 45° and the melted ointment dispersed by placing the flask on a shaker for an hour. 1 ml. of the liquid was mixed with blood agar and a plate poured. Counts were carried out after incubation at 37° for 24 hours. Of the ointments examined 14.5 per cent were sterile, and most had counts of less than 50 organisms per g. For experimental purposes an ophthalmic ointment base consisting of white wax 1, cetyl alcohol 1 and isopropyl myristate (Deltylextra) 4 was inoculated with *Micrococcus pyogenes* var. *aureus*. Various substances were examined for their efficiency in killing or inhibiting growth of the organism, and it was shown that benzyl alcohol (0.5 per cent.) is more effective than benzalkonium chloride (0.02 per cent.) or chlorbutol (0.25 per cent.) A series of ointments prepared extemporaneously with the addition of 0.5 per cent. of benzyl alcohol showed a reduction of 97 per cent. in their content of bacteria, as compared with similar commercial ointments prepared without benzyl alcohol.—J. Pharm. Pharmacol., 1959, 3, 188.

NEW ANTIDIABETIC DRUG

The new oral hypoglycaemic agent, Diabinese (chlorpropamide), developed and produced by Pfizer, recently became generally available to physicians; previously it has been reserved for use in diabetes clinics and hospitals. More potent than any other available oral antidiabetic drug, its main indication is uncomplicated diabetes mellitus of the stable, mild or moderately severe non-ketotic, maturity-onset or adult type. Diabinese has been used successfully in some patients suitable for oral hypoglycaemic therapy who have failed to respond to tolbutamide. Both in normal persons and diabetics, the drug has up to twice the potency of tolbutamide on single dose administration, and up to six times this potency on continued administration. The large majority of diabetic patients for whom oral therapy is indicated can be placed directly on Diabinese at the same time as insulin is discontinued. The side effects are said to be generally transient and not serious.—Industrial Chemist, March, 1959.

REPORT ON PRESSURE-STEAM STERILISATION

Although a number of technical causes contribute to the inefficiency of sterilising processes, the underlying factor responsible for the situation as a whole is a widespread lack of understanding throughout the Health Service of the exact conditions required for efficient sterilisation and for the safety of those who operate sterilisers. This is the conclusion of the working party set up by the Medical Research Council in 1957 to define the performance of pressure-steam sterilisers and to consider how a satisfactory standard of efficiency may be obtained (*Lancet*, 1959, 1, 425). The members of the working party included Dr. J. H. Bowie, Dr. J. W. Howie, both well known to pharmacists for their work in this field, and Mr. G. Sykes. The report gives an account of the principles and technical procedures of steam sterilisation, and the more common defects leading to inefficient processing are described. Some immediately applicable remedies are suggested, and longer-term matters of policy are discussed. The lack of understanding of the technical requirements involved is attributed by the working party to the fact that no one member of the medical staff is given the final responsibility of ensuring the provision of suitable equipment and its proper use and control by specially-trained operators. Until this is done, the report concludes, patients in many hospitals will continue to be exposed to the unnecessary hazard of infection caused by the use of imperfectly sterilised articles.—Pharm. J., March 7, 1959.

STERILISATION IN HOSPITALS

The Pharmaceutical Chemist's Responsibility

A letter from Professor E. Shotton and Dr. D. Train, of the School of Pharmacy, University of London, published in *The Lancet* of March 14, criticises certain aspects of the report of the Medical Research Council working party on sterilisation and of that journal's leading article on it. Though the surgeon or doctor, they say, might be legally responsible for a patient under his care, he had a right to expect that materials handed to him purporting to be sterile should indeed be so, particularly in a hospital. The point at issue was, who should be responsible for those materials? The processes of heat sterilisation were primarily physical and engineering problems, and once the conditions of time and temperature had been accepted for general application, bacteriology hardly came into it. But sterilisation as a unit process involving diffusion, heat transfer, and plant operation, required rather more than "rudimentary knowledge of bacteriology, physics and chemistry." For many years the correct type of technological training had been incorporated in courses for degrees in pharmacy and for the Pharmaceutical Society's diploma, together with a sound background of bacteriology and physical chemistry. The bacteriological training was oriented to sterilisation processes, aseptic handling, and disinfection. This led to the conclusion that a pharmacist, by training and outlook, was the most suitable person for undertaking, and being responsible for, the supply of sterile materials. Indeed, if his professional services were to be properly used, he should also be responsible for training of personnel, and for formulating techniques and procedures for the different types of sterilisers installed. His background knowledge of plant operation should enable him to appreciate the limitations and frailties of the accessory instruments used with sterilisers and to co-operate well with the engineer. However, alike in the report from the Nuffield Provincial Hospitals Trust, the report of the M.R.C. working party, and the editorial, the pharmacist's claims and his training were ignored. Yet in at least two London hospitals there were plans for a central sterilising department to be in the charge of the pharmacist.—Pharm. J., March 21, 1959.

THERAPY OF RHEUMATOID ARTHRITIS

Dr. D. D. MacDonald (May & Baker Ltd.) addressed the Portsmouth Branch of the Pharmaceutical Society Great Britain on "Current Therapy in Rheumatoid Arthritis."

An abstract in *The Chemist and Druggist*, February 28, 1959, reads:—

"Dr. MacDonald outlined the history of the disease and indicated the extent of its existence today. Its incidence was greater among women, especially in women of early middle age, than among men. Rheumatoid arthritis was a disease of connective tissue. It caused inflammation, granulation and final stiffening of the joints. Anaemia was one result and that affected the condition of the heart. The main treatment consisted of analgesics, splinting to prevent deformity, and physiotherapy. Gold and phenylbutazone were effective in some cases, and salicylates gave relief. If those failed, steroid therapy was tried.

Recently trials held with antimalarial drugs had proved successful; the results were not immediate, and it might be several months before any improvement was noted, but there seemed hope that this line of research would yield results."

PHARMACEUTICAL SOCIETY OF GREAT BRITAIN

New Department of Pharmaceutical Sciences

As already announced, the Council of the Pharmaceutical Society has had under review the reorganisation of the Society's scientific activities. It has now completed its consideration of the matter and decided to establish a Department of Pharmaceutical Sciences for the purpose of carrying on these activities in an enlarged and more effective manner, and giving them a more distinctive place in the Society's work. The basis of this reorganisation is the Scientific Publications Department and the Museum, but in addition to absorbing these the new department will be the instrument for giving effect in the broadest sense to the objects of the Society relating to the advancement of pharmacy and chemistry and the application of pharmaceutical knowledge for which in the past there has been no separate executive machinery.

The co-ordination of scientific activities within a department solely concerned with their promotion will ensure the systematic examination of problems and proposals in connection with them, and will enable better use to be made of the resources available. Among the purposes with which the Department will be concerned are the following:—

To collect information on materials used in pharmacy and in particular on the sources, composition, chemical and physical properties, formulation, action and uses, and analysis of drugs and related substances.

To make available the above information through the various publications of the Society and by any other suitable methods.

To provide standards and standard methods of assay for drugs and pharmaceutical materials where these are not available in the British Pharmacopoeia or elsewhere and to publish these standards and standard methods in suitable form.

To develop and publish standard formulae.

To undertake in the laboratory research where this is required for the various purposes set out above.

To establish and maintain connection with those engaged in pharmaceutical research and to encourage research by pharmacists in whatever capacity they may be engaged.

To maintain and expand as necessary the collection of materia medica and the herbarium.

To arrange or assist in arranging exhibitions.

To arrange (a) meetings of the Society on scientific, technical and professional subjects, (b) refresher courses and other forms of post-graduate education, and to assist Branches of the Society in making similar arrangements.

To provide the Council with reports on scientific subjects as requested.

A committee to advise the Council on the policy of the department will be set up together with a number of specialised committees to deal mainly with practical investigations. One aspect of the department's work, i.e., that connected with exhibitions, will be part of a wider scheme embracing all forms of publicity. A publicity committee to advise the Council on such matters is in the course of being established.

Dr. K. R. Capper and Mr. S. C. Jolly have been appointed respectively Director and Assistant Director of the Department, and Dr. T. E. Wallis, Emeritus Curator of the Museum, will act in an advisory capacity to the Department in connection with the collection of materia medica and the herbarium.

As part of the reorganisation, all historical material in the Society's possession has been placed in the custody of Miss A. Lothian, who has been given the title of Keeper of the Historical Collection in addition to that of Librarian.—*Pharm. J.*, March 14, 1959.

BIOCHEMISTRY AT THE ROYAL COLLEGE OF SURGEONS

With regard to the gift of £100,000 to the Royal College of Surgeons (London) by Mr. Jack Cotton, towards the establishing of a chair of biochemistry, *Nature*, February 28, 1959, commented:—

"In days gone by, surgical shock was interpreted in terms of vaso-motor reactions and nervous responses to the stimulus of a severe injury. Today attention is directed rather to the metabolic (chemical) response to injury, and since a chemical mechanism is now known to underlie the phenomena of shock, its treatment must be chemical also. Hitherto the process of wound healing has been regarded as a matter of cellular and vascular processes, explicable on a histological basis. But there was a mysterious initial phase when nothing could be seen to be going on in the wound, sometimes referred to as 'the lag period.' Recent research has shown that during these early days there is intense chemical activity in the wound, resulting in the accumulation of certain substances which are essential for the natural process of repair and without which the lag period may be indefinitely prolonged. There are profound biochemical changes in patients suffering from cancer, and furthermore there are tumours which are known to depend for their growth upon certain chemical substances, the deprivation of which can result in such diminution of growth as to suggest the possibility of treating cancer by chemical means. These are only examples to indicate the importance of bio-chemistry in surgery today; and it is no wonder that the Council of the Royal College of Surgeons decided some time ago to establish a sub-department of biochemistry in the Department of Physiology, with the dual purpose of promoting research and of amplifying the educational facilities which the College provides for post-graduates studying the basic medical sciences."

THE PHARMACEUTICAL ASSOCIATION OF AUSTRALIA

The H. W. Woods Travelling Scholarship 1959

Value of Scholarship

The Association has pleasure in announcing the H. W. Woods Travelling Scholarship, 1959.

The scholarship is valued at £A1250.

Object

These scholarships are awarded to enable young Australian pharmaceutical chemists to further their training by means of study or research overseas in a subject or subjects related to the teaching of pharmacy or in any branch of pharmacy or pharmaceutical practice.

CONDITIONS OF AWARD OF 1959 SCHOLARSHIP

The donor has given the Executive of the Pharmaceutical Association complete authority to determine the terms and conditions on which the scholarship shall be awarded. Conditions of the award for 1959 are:

1. Qualifications

The Applicants must be registered pharmaceutical chemists and graduates of a recognised pharmaceutical teaching establishment in Australia.

2. Applications

- (a) The latest date for receipt of applications is **June 30, 1959**.
- (b) Applications must be addressed to the Hon. General Secretary, Pharmaceutical Association of Australia, 360 Swanston Street, Melbourne. Envelopes must be endorsed: "H. W. Woods Travelling Scholarship."
- (c) Applicants must submit an outline of the project they propose to carry out together with evidence of their ability to do so. Each applicant must forward with the application the names of three suitable persons as referees. One of the referees should be the head of the Pharmacy Department or College of Pharmacy from which he graduated.

3. Conditions

- (a) The successful applicant will be required to undertake studies, investigation or research for a period of not less than 12 months or one academic year in such countries as may be approved.
- (b) The award of the scholarship will be made by the Executive of the Association, and its decision will be final.
- (c) The successful applicant will be required to submit to the Executive periodical reports on his work at times to be agreed and a detailed report within three months after expiration of the scholarship.
- (d) An undertaking will be required from the holder of the scholarship that he will return to Australia and remain in active association with pharmacy for at least two years after expiry of the scholarship; if required by the Association he will undertake to deliver a series of lectures or addresses on his work abroad in two or more States of the Commonwealth.

PHARMACEUTICAL SERVICES IN SMALLER HOSPITALS IN U.S.

More than 4000 hospitals throughout the U.S. with less than 100 beds, should enlist the help of local retail pharmacists to assist in providing medications for their patients, according to Assistant Prof. Alex Berman and John J. Zugich of the University of Michigan.

Zugich, formerly a hospital pharmacist and now Assistant Director at the vast University of Michigan Medical Centre, and Professor Berman of the College of Pharmacy have just prepared a resource manual for the administrators of smaller hospitals and community pharmacists entitled "Pharmacy Service in Smaller Hospitals."

The handbook offers for the first time in print an orientation to the pharmacy services problems facing the community hospitals and outlines helpful, working relationships between smaller hospitals and retail pharmacists.

Professor Berman points out that there is a great difference in practices between retail and hospital pharmacy. The retail pharmacist needs special guidance to provide the most complete service for small hospitals. The new manual will help both the administrator and the pharmacist in becoming acquainted with the needs and demands of such a working relationship.

By utilizing all possible resources of the community, the smaller hospital can increase both efficiency and economy in pharmaceutical services for its patients.—J. Am. Pharm. Ass., January, 1959.

SEA TRANSPORT AND LIQUID METHANE

Methane Pioneer arrived at Canvey Island, Essex, on February 20 with the first load of liquid natural gas ever to be carried by sea. This marked the completion of the first stage in an experiment which has attracted world-wide interest. It will be necessary for three or four more trial voyages of this nature to be undertaken before the technical and economic possibilities of this project can be fully assessed. The load is being transferred to the holder tanks at Canvey Island, and will then be reconverted to gas and taken by pipeline to the Romford Works of the North Thames Gas Board for reforming before it can be mixed into the town's supply. *Methane Pioneer* left the Gulf of Mexico on her voyage across the Atlantic on January 31. She is jointly owned by the Gas Council of Great Britain and Constock International Methane Ltd. of the U.S.A. The experimental load consisted of 2000 tons of liquid natural gas from a Gulf Coast oilfield. After liquefaction, reducing its volume to 1/600th of the space occupied in gaseous form, it was loaded into five special tanks in *Methane Pioneer*, made of aluminium with a 12 in. insulation of balsa wood and an outer jacket of steel.—Chemistry and Industry, February 28, 1959.

I.C.I. STATEMENT ON CANCER RESEARCH

In view of the recent circulation of reports which associate Imperial Chemical Industries Ltd. with a so-called "cure" for cancer, the company have issued the following statement: "The Pharmaceuticals Division of I.C.I. has been engaged in cancer research for over 20 years and its work is continuing. Although from time to time possible leads have emerged, these have not, so far, provided any positive results. At the present time I.C.I. is unable to express any opinion as to whether or when its work might have a successful outcome, and reports that this is imminent are without

foundation and, in view of the false hopes that they can raise, are to be regretted. While I.C.I. attaches great importance to its pharmaceutical interests, these are a relatively small part of the interests of the company as a whole, so that in the event of a successful outcome to its research work on cancer, the company's commercial and financial position would not be significantly affected."—Chemistry and Industry, March 7, 1959.

MEDICAL AID FOR UNDERDEVELOPED COUNTRIES

(From "Current Comment," J. Am. Pharm. Assoc., January 1959.)

J. T. Connor, President Merck & Co. Inc., in commenting on a Russian offer of a loan to India of twenty million dollars at 2 per cent. interest, said:

"Every rouble that goes through the Iron Curtain is bound on a political mission. In this case, the mission would be to build a showcase to display Communism as a friend of the sick and disabled."

Mr. Connor pointed out that the Soviet is "at least as well equipped medically as it is economically" to match us in the underdeveloped countries. It already, he said, has 25 per cent. more doctors per capita than we and is graduating new ones at the rate of 16,000 a year compared with our 7,000. The Russian doctor, he said, is trained in foreign languages, familiar with relatively crude living and working conditions, and the Kremlin can send him anywhere it likes.

Mr. Connor proposed a bold new foreign medical aid programme for the underdeveloped countries and recommended the following four-point programme:

1. Alert the public to the challenge of Soviet medicine in the underdeveloped countries. One way to do this would be through a commission of leading experts to find the facts and report them.

2. Develop a bold new foreign medical aid programme of our own. The Hill-Fogarty Bill for international medical research should be supported and enlarged to include scholarships for foreign medical students who would return to the underdeveloped countries to teach and do research.

3. Support private organisations that are working in the foreign medical field, such as Medico, The People-to-People programme, World Rehabilitation Fund, World Medical Association, and Columbia's Institute of Nutrition Sciences.

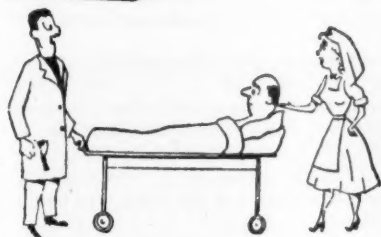
4. Encourage participation by our pharmaceutical industry.

DETERGENT ALKYLATE—SHELL ACTIVITY AT GEELONG

Following the recent opening by Shell of a sulphuric acid plant at Geelong and their decision to build an Epikote resin plant at Clyde, N.S.W., Shell are now to build a detergent alkylate plant at Geelong. This will cost more than £1,000,000 and is due for completion in 1961.

It is estimated that its production will show an annual saving in foreign currency of the order of £500,000.

The detergent alkylate is required for special applications in industry and by local soap companies for use in synthetic detergent powders which are increasingly supplementing traditional washing products in Australia as they have already done abroad.



Everyone is talking about...

... PANADOL—the new Winthrop analgesic which contains NO aspirin, NO phenacetin, NO codeine. Thus PANADOL does not cause side-effects—enabling those people who cannot tolerate ordinary analgesics to obtain **safe**, fast relief from mild pain.

These advantages are establishing PANADOL as the analgesic of choice. Direct mail and medical journal advertising, backing the personal calls of Winthrop detailers, is ensuring that PANADOL will become even more firmly established as the physicians' choice. And with everyone talking about PANADOL, it is only logical that they should be prescribing PANADOL. So be prepared. Make a note to check your PANADOL stocks.

PANADOL

Tablets, 0.5 g. N-acetyl-p-aminophenol,
in plastic containers of 20 and 50

**STOP PRESS — Just announced — The
release of PANADOL ELIXIR**
a Palatable Pediatric Antipyretic Analgesic



6A57

WINTHROP LABORATORIES. Division of Sterling Pharmaceuticals Pty. Limited

Mr. Chemist . . .

YOU

BE

THE

Judge . . .



OF THE BEST BRANDS TO SELL

What do you demand of the merchandise you sell?

PROFITS—genuine cash-in-the-till profits and not paper profits from "shelf-warmers"?

REPEAT VALUE—selling quality medicines that won't come back—to customers who will?

NATIONAL ADVERTISING—constant, powerful advertising that works **FOR YOU**, and you alone—bringing customers into pharmacy and **NOT** to grocers, chain stores and the like.

And how many brands offer you **ALL** these advantages? Not many!

YOU BE THE JUDGE. Compare the profits you make on **NYAL** Winter Medicines with the profits on **ANY** open-sellers. On **Nyal** (on the average) you make 61.8 per cent. on cost; on the open-sellers (as a general rule), 33 1/3 per cent. on cost.

You be the judge of the selling power of **Nyal** advertising. For example, can you think of a cough mixture that enjoys

as huge a sale as **Nyal** "Decongestant" Cough Elixir? Or a cold sore preparation, that is in such demand as **Nyal** Cold Sore Lotion and Cream? Or a nasal preparation that has the sale of the **Nyal** Nasal Spray? Or a throat tablet that has the sale of **Nyal** Iodised Throat Tablets? **Nyal** Medicines are in great, consistent demand all the time. They enjoy a high degree of consumer preference all year round.

During June, however, advertising on **Nyal** Winter Medicines will be 20 per cent. more powerful than you have ever known. Never before has so much money been spent on "chemists only" advertising in one single month. This powerful campaign will bring you **EXTRA** sales and profits if you "tie-in".

To get the sales-making display material especially produced for the 11th June drive, ask your **Nyal** representative or write direct to the Advertising Division. The material, which comprises three natural-colour showcards and price tickets, will reach you (free and post free) not later than the 11th May. **REMEMBER**, the more you help this advertising, the more sales and profits **you** will make. **You** be the judge.

It pays you to **DISPLAY NYAL** — all YEAR ROUND

N459

C.S.I.R.O. CHEMICAL RESEARCH LABORATORIES

C.S.I.R.O. has decided to alter the status of one of its largest research groups, the Division of Industrial Chemistry, which has its headquarters at Fishermen's Bend, Melbourne. The Division will in future be known as the C.S.I.R.O. Chemical Research Laboratories, and its Chief, Dr. I. W. Wark, becomes the first Director of the Laboratories.

Two of the largest Sections of the Laboratories will become Divisions: Dr. A. L. G. Rees will be Chief of the new Division of Chemical Physics and Dr. K. L. Sutherland will be Chief of the new Division of Physical Chemistry.

These two new Divisions together with the remaining four major Sections will comprise the Chemical Research Laboratories. These Sections and their Officers-in-Charge are as follows: Minerals Utilisation—Mr. R. G. Thomas, Organic Chemistry—Dr. H. H. Hatt, Cement and Ceramics—Mr. A. J. Gaskin, Chemical Engineering—Dr. H. R. C. Pratt. The Foundry Sands Section will continue to be affiliated with the group.

Dr. Wark has been Chief of the C.S.I.R.O. Division of Industrial Chemistry since its formation in 1940, and under his guidance this group has grown until it now has a research staff of 100 and a total staff of 300.

Some of C.S.I.R.O.'s more spectacular applications of science have come from the Chemical Research Laboratories. These include the process using cetyl alcohol for controlling evaporation from dams and reservoirs, the process for separating hafnium from zirconium which is of significance for atomic-powered submarines, and a process for recovering uranium from its ores.

INTERNATIONAL PHARMACY

Progress in British Commonwealth

Speaking at the annual dinner and dance of the Huddersfield Branch recently, the President of the Pharmaceutical Society Great Britain, Mr. D. W. Hudson, referred to the development of pharmacy in the Commonwealth countries, and stressed the need for a more closely integrated international policy. The President referred to the help which had been given to, and the enormous strides which had been made in, Nigeria and Ghana where "new colleges have been built and equipped to a standard as high as anything I have seen anywhere else in the world." Less than a month ago, two of the Pharmaceutical Society's examiners had returned from Ghana, after conducting the first examination in all Africa of African students trained in their own colleges to the British curriculum.—Pharm. J., March 7, 1959.

DRUG EXPORTS BY GREAT BRITAIN

During 1958 a record in the export of British drugs and medicines to U.S.A. was reached. *The Journal of the Royal Institute of Chemistry* (March 1959) reports that the figure announced by the Association of British Pharmaceutical Industry was £1,100,000 compared with £830,000 in 1957. Exports to Egypt, which declined as a result of the international situation, had recovered. Increased pharmaceutical exports went to Nigeria, New Zealand, the Irish Republic, Pakistan, the U.S.A. and Canada. There was a decrease in exports to India owing to the financial crisis and stringent import policy.

With regard to productivity the *B.P.C. Bulletin* says: "Chemical manufacture is one of our most progressive

industries. Output has doubled in the past 10 years, and labour productivity has risen by 65 per cent., which is more than twice the rise for manufacturing industry as a whole. Much of this increase in productivity has been obtained by the introduction of new plant, products and processes; capital employed has risen from £230,000,000 in 1948 to £600,000,000 today. But the industry has been equally alert to the possibilities of raising productivity by methods improvement and the use of work study."

SEAWEED: A NUISANCE AND A VALUABLE CHEMICAL

To most people in Britain seaweed is just a nuisance. Some may know it as a cause of fouling ships, thus reducing speed and involving increased fuel consumption. On the other hand, those who have visited the countries of the Far East may have learned of the high regard in which it is held there as foodstuffs. But how many people appreciate seaweed's increasing contribution to scientific and industrial development in Britain?

In the past marine algae, to which the various types of seaweed belong, were of considerable importance as sources of potassium and iodine. The discovery of mineral deposits containing these elements, however, has made their recovery from algae unprofitable.

In Beer and Blancmange: But a seaweed such as the Irish Moss is used in many ways. It goes into the making of blancmange and other puddings. Brewers use it to clear and to give body to beer. Because it helps to keep substances in suspension, it is of interest to manufacturers of pharmaceutical products and cosmetics, especially hand lotions. And car polishes, adhesives and so on are also the better for the admixture of alginic acid, processed from brown seaweed.

This increase in the utilisation of seaweed or of acid derivatives has received a great stimulus since 1944 from the work of the Institute of Seaweed Research at Inveresk, near Musselburgh, in Scotland. The research undertaken there has aroused great interest in practically every maritime country in the world.

The Institute represents a novel type of international scientific co-operation. In 1957, the Arthur D. Little Research Organisation of Cambridge, Massachusetts, the oldest private industrial research organisation in the United States, and a number of prominent British scientists and others interested in international scientific co-operation joined forces. They acquired, with the consent of the British Government, the Institute's laboratories.

Some of the Uses: The new Institute, which is known as the Arthur D. Little Research Institute, is under a joint Anglo-American Board of Management, and Dr. F. Neville Woodward, former Director of the Institute of Seaweed Research, is in charge of its operations. It is unique in being an independent research organisation yet working in close association with industry and the universities.

The manufacture of a new type of dyestuff for textile printing is the direct result of the Institute's researches. And so is the work on an anti-clot-forming agent by some of the leading pharmaceutical manufacturers in Britain.

The use of seaweed meal as a top dressing in turf culture and of alginates in foundry practice to keep the moulding sand in good condition for a longer time are yet other examples of new applications of this material which is regarded by bathers in the sea as "just a nuisance."—U.K. Information Service.

National Health Scheme

Additional Commonwealth Benefits

NATIONAL HEALTH BILL 1958

Second Reading Speech by Dr. The Hon. D. A. Cameron, O.B.E., M.P.,
Commonwealth Minister for Health, House of Representatives, Canberra, A.C.T.

"The purpose of this Bill is to give effect to the proposal announced by the Treasurer in his Budget Speech to provide Commonwealth assistance to enable medical and hospital benefits to be paid to persons who cannot be insured at normal rates because of age, pre-existing illness or chronic illness.

I am sure that it will assist the House to appreciate the value and importance of this measure if I spend some little time in the first instance in explaining the problem which this Bill is intended to meet.

The development of scientific medicine, which has taken place within recent years, has made the provision of medical services not only a very complex, but an extremely expensive process. It demands long training of practitioners, great hospital construction and maintenance, an extensive system of laboratories and of X-ray facilities for diagnosis and treatment, and a great apparatus of research, not only for the use of clinical medicine, but for the production of the costly drugs which it uses, and the investigation of the sciences on which it is based.

The result has been, not only a great improvement in medicinal efficiency, but a great and inevitable rise in cost. In consequence, no modern State is without some type of national health service designed to ensure the availability of modern medical resources and benefits to its citizens.

It is important to realise, in this connection, that there is no 'best' national health scheme which can be applied universally, but that what each country requires is one suited to its own particular circumstances and its own national character.

It is, of course, possible to learn from the experiences of others, but an attempt to transpose the national health scheme of one country to another will be just as fruitless as an attempt to transpose, without change, the system of government from one country to another, ignoring the differences of character and circumstances which exist.

In Australia we have adopted a system of government-assisted voluntary health insurance which, I believe, is particularly suited to our conditions, which are those of a growing and expanding nation making immense demands on its resources, both financial and physical, as it does so—a system, moreover, which is suited to the enterprising individuality of our national character.

Medical and hospital insurance is necessarily conducted, not only in Australia, but in other parts of the world, on an actuarial basis. This means that insurance funds insure their members only against what may be termed normal risks. No medical or insurance fund could survive for long if its business was conducted on any other footing.

The Problems of Chronic and Long-Term Illness

The premium for the normal risk of hospital or medical attention can be determined with reasonable accuracy and is within the means of most people in the community. There are, however, a number of risks associated with health for which a normal weekly payment cannot provide. The older members of the community are specially subject to these extra risks, which take the form of chronic and long-term illnesses and ailments in existence to the date of joining an insurance fund.

For the individual these risks are extremely serious

and it is generally agreed that a fully developed national scheme ought to provide adequately for them. The special problem that exists is that health insurance organisations cannot give an insurance cover for abnormally long illnesses, or for ailments which a member contracted before he joined the fund. If they were to attempt to do so the premiums they charge to their normal risk contributors would have to be increased to an unreasonably high level.

However it is recognised by the insurance organisations, by the Government and, I believe, by all responsible people, that benefits ought to be paid in these cases. The Government's task has been to find a mechanism which would enable benefits to be paid whilst at the same time preserving the principles of the voluntary scheme which has been such an outstanding success.

The New Plan

The solution which the Government proposes for this problem is contained in this Bill. Briefly, the Bill provides that medical and hospital insurance organisations will be invited to establish special accounts for the payment of benefits to the aged, to persons with pre-existing ailments and to the chronically ill. These accounts will be operated and maintained by the organisations themselves, but they will be guaranteed by the Commonwealth.

Upon establishment of a special account an organisation will credit to the special account the contributions of all members who attain the age of 65 years. These members will become entitled to benefits from the special account, regardless of the nature of the illness, the length of the illness, or whether it was a condition from which they were suffering at the time they joined the fund. I need hardly emphasise what a tremendous boon this will be to members.

As a general rule the organisations will retain, in their ordinary accounts, the contributions of persons who are under the age of 65 years, and these persons will continue to receive benefits from the organisations' ordinary account as they have always done. However, when a claim is made on a hospital or medical fund, and the claim is disallowed under the ordinary rules of the fund relating to pre-existing ailments, chronic illness, or maximum benefits payable within a year, the organisation will then transfer that contributor to the special Commonwealth-guaranteed account. When this transfer has been made the claim in question, and future claims from that contributor will be paid from the special account.

Thus contributors to medical and hospital insurance organisations will become entitled to payment of benefits, regardless of the nature of the illness, the length of the illness, or whether the medical condition was one which the contributor had at the time of joining the fund.

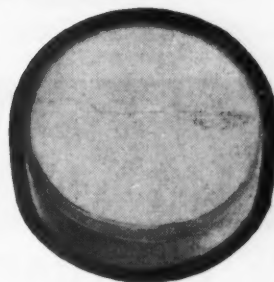
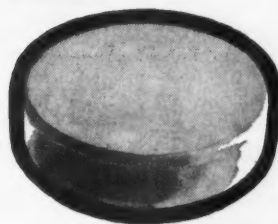
That, in broad terms, is the solution to this long-standing and difficult problem which the Government proposes in this Bill. Its implementation will be in the hands of the medical and hospital insurance funds which are already providing a first class health service to more than six million insured persons and their dependents throughout Australia. For some time, I and a number of my senior officers, have been engaged in conducting detailed negotiations with the hospital and



*Stock and
Display...*



**they go
a long way
towards healing
a sore throat**



IMPERIAL CHEMICAL INDUSTRIES OF AUSTRALIA & NEW ZEALAND LTD.

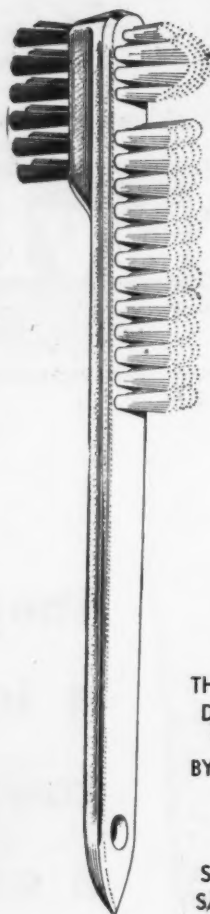
1728/14 SAV. 1967. 9768



Every denture-user who enters your pharmacy is a prospective buyer of a SAMSON Denture brush. The SAMSON, with its scientific 3-way design and tartar-removing tip, cleans dentures as no ordinary toothbrush could do.

DISPLAY THE SAMSON DENTURE BRUSH PROMINENTLY and PERMANENTLY.

Place it where the purchaser has only to say 'I'll have one of those, please,' to obviate embarrassing requests or explanations.



THE SAMSON PATENT
DENTURE BRUSH IS
"CHEMIST ONLY"
BY GUILD CONTRACT

Show—and **SELL**—the
SAMSON all the time.

Made by:

THE NATIONAL BRUSH COMPANY (AUST.) LTD.

239 Pacific Highway, NTH. SYDNEY
60 Flinders Lane, MELBOURNE

Q'LAND: D. Maclean Pty. Ltd.
W.A.: Clayden & Carpenter Ltd.

SOUTH AUST.: Arthur Searcy & Son Ltd.
TASMANIA: H. T. Grounds

medical insurance funds about the implementation of this plan. The funds are in complete agreement with the principles of our proposals. The funds are no less anxious than the Government to arrange for the aged and chronically ill people in the community to be paid adequate benefits, and they may be relied on to co-operate with my Department in the work of introducing this plan so that it operated smoothly, economically and in a manner that will give no cause for complaints from contributors.

As to the details of the Bill, I think it will suffice here if I explain in general terms what the detailed provisions are and later in the Committee stages I will provide any further information desired.

The Establishment of Special Accounts by Organisations

Clause 15 of the Bill provides that a registered organisation may establish a special account. The organisation will be required to pay into that account the contributions of all contributors who are 65 years of age or over. Thereafter these contributors will receive their benefits from the special account.

As regards contributors under 65 years of age, the organisation will continue to follow its present practice until it receives a claim which could be excluded from benefit by its rules relating to chronic illness, pre-existing ailments or maximum benefits. Upon receipt of such a claim the organisation will have an option. It may forgo its right to disallow the claim and pay the contributor his benefit. On the other hand, it may elect to transfer the contributor to the special account, in which case the claim will be paid from that account. This means that whichever course the organisation takes, the benefit will be paid to the contributor.

The contributor himself will not have to do anything different from what he already does now. He will not have to apply for transfer to the special account, nor will he have to take any action to secure entitlement to the new benefits provided for by this Bill. All his new entitlements will be provided for him by his organisation under the arrangement made with the Government.

The Rate of Contributions Unchanged

The rate of contributions payable to an organisation will not be changed by the operation of this Bill. A contributor who is put into the special account will continue to pay the same rate of contribution that is payable by an ordinary contributor. In short, his entitlement to benefits will be substantially increased, but his rate of contribution will not be changed.

The benefit to be paid to persons whose claims are within the scope of pre-existing ailment, chronic illness or maximum benefit rules, will be standard rate benefits. In the case of hospital fund benefit standard rate benefit is defined in this Bill to be the rate of 16/- per day. In view of the fact that Commonwealth benefits of 20/- a day are payable under existing legislation, payment of the new standard rate benefit will result in the payment by the organisation to the contributor of total benefits equal to the normal public ward charge of 36/- per day.

In the case of medical fund benefit, the standard rate will be equal to the amount specified in the Schedules to the National Health Act. Under existing legislation, contributors receive Commonwealth benefits of amounts specified in the Schedules and the new proposals will thus result in payment of double amounts in the Schedules in all cases.

The other provisions in the Bill may be described as machinery provisions, which are substantially in line with existing medical and hospital insurance fund practice. The objective of these provisions is to provide that, so far as practicable, a special account contributor will be on exactly the same footing in his organisation as if he were an ordinary contributor.

It will be necessary to require some measure of uniformity as between special accounts regarding certain minor matters where the organisations themselves have not a uniform practice, e.g., special account contributors will not be permitted to show a "profit" on their claims over and above the amount of the hospital charge. I think all will agree that this is reasonable, remembering that deficits on the special accounts will be met with by the Commonwealth.

Conditions of Payment of New Benefits

The new benefits provided for by this Bill will not be payable for accommodation provided at a benevolent home, convalescent home, home for aged persons, rest home or similar institution. The benefits provided under existing legislation are in most cases adequate to meet the cost of treatment provided at these homes. Existing benefits will, of course, be continued.

There will be a minimum waiting period of eight weeks from the time a new contributor joins an organisation during which benefits will not be payable for hospital treatment or medical services except in exceptional cases such as injuries resulting from accidents. This is a new condition in relation to Commonwealth medical benefits, but it is in line with the existing legislation in regard to Commonwealth additional hospital benefits, and it also conforms with the practice of insured organisations in regard to payment of fund benefits. It would obviously be quite out of keeping with the insurance principle if people were permitted to collect benefits immediately if they had neglected to insure until the actual onset of an illness. Along with the other provisions of the special account plan this condition will come into effect on 1st January next. It will not affect any contributor who insures before that date.

The benefits payable under the insurance plan provided for in the Act are intended to assist individual persons to pay their hospital and medical accounts if they themselves have paid contributions to an insurance fund or if contributions have been paid on their behalf to an insurance fund by their employers. The benefits are not intended to be available to State Government institutions, except in so far as bona fide charges made by the institution to its patients are wholly or partly met from benefits payable as a result of bona fide insurance membership undertaken by the individual patients of the institution. Clause 6 of the Bill is designed to put this intention into effect. Any person already insured will continue to be regarded as a contributor.

Conclusion

The Australian National Health Service is a fine example of co-operation between different elements of the community; between the Government, benefit organisations which operate on a voluntary basis and include the great Friendly Societies which have played such a prominent part in our national life for so many years, the pharmaceutical profession, the medical profession and individual members of the community.

It is a social service of the best type in that, by this partnership, it assists individuals to help themselves. It recognises that all have a responsibility in the State, individuals as well as Government, and affords them opportunities to discharge this responsibility.

Moreover it preserves better than any other system the independence of the individual requiring medical attention and of the profession which provided it, both priceless national assets.

These amendments will provide a great advance in social service legislation by assisting those who, by reason of certain disabilities, are at a disadvantage in securing the full benefits of the scheme, and they are, I believe, a very notable addition to the extremely fine record of the Government in the provision of social services in our country.

Wandering Herbalists of the Middle Ages

Part 2

By Frank A. King

In 1421, the young king Henry V., uneasy concerning the many wandering herbalists in the British Isles, passed an "Ordinance against the meddlers with physick and surgery," hoping to "get rid of the mischiefs and dangers which have long continued within the kingdom among the people by means of those who have used the arts and practice of physick and surgery, pretending to be well and sufficiently taught in the same arts, when of truth they are not so."

In future there were to be severe punishments imposed on all doctors who had not been approved in their arts, "that is to say, those of physick by the universities, and the surgeons by the masters of that art." (Rolls of Parliament, 9 Hen. V., vol. iv., p. 130.)

However, the irregularities continued, as bad as before. Therefore, in 1461, in the first year of the reign of Edward IV., to give greater authority to those who practised blood-letting and cupping, the State recognised the incorporation of the Company of Barbers of London who used the faculty of surgery. At the same time, the members of this livery guild were able to practise as physicians and doctors.

But, even so, the barbers, cheapjacks, empirics and sorcerers continued to flourish even amidst the spread of knowledge during the period now termed the Renaissance. Consequently King Henry VIII. became alarmed, and, in 1512, by statute (3 Hen. VIII. cap 11), promulgated new rules, and this statute enacted:

"The science and connyng (= cunning = knowledge) of physyke and surgeries, to the perfecte knowledge whereof bee requisite bothe grete (= great) lernyng (= learning) and wide experience, ys (= is) daily within this Royallme (= realm) exercised by a grete multitude of ignorant personnes, of whome grete partie have no maner of insight in the same nor in any other kynde of lernyng; some also can (= can = know) no lettres (= letters), soofarfurth that common artificers, as smythes, wevers (= weavers), and women boldly and custumably take upon them (= them) grete curis (= cures) and thyngs of grete difficultie, in the which they partly use sorcery and which-crafte (= witchcraft), partly applie such medicine unto the disease as to be very noyous (= noxious) and nothyng merely therefore, to the high displeasure of God."

Consequently, any person who wished to practise as a doctor or physician in London, or within seven miles of the City, had to submit to an examination before the Bishop of the capital, or before the Dean of St. Paul's Cathedral, assisted by "four doctors of phisyk." In the country districts this examination was to take place before the bishop of the diocese or his vicar-general.

In 1540, bluff King Hal (Henry VIII) united the Company of Barbers with the College of Surgeons, and each year granted the new guild the bodies of

four condemned criminals for the purpose of dissection and the study of anatomy.

Hardly had the crafts of medicine and surgery been recognised officially when there came a swing round in public opinion, and the legislators were forced to consider the claims of the despised unregistered "quacks"—possibly because, as a result of the dissolution of the monasteries, many monks, with advanced knowledge of surgery and medicine, had been forced to join the ranks of the wandering herbalists. Nearly every religious house had a herbal-garden from which the monks obtained the plants from which they prepared their medicines. Many of the monastic establishments had hospitals in which the brothers tended the local sick and also any ailing members of the fraternity. The humble artisans had been well treated at the monastic hospices, so had great faith in the medical treatments prescribed by monks and nuns.

Both villagers and townfolk patronised the wandering herbalists, those possessors of infallible secrets, who had been so hardly treated by the statute of 1511.

So, in 1541, and 1543, new laws (Statutes 32 Hen. VIII. cap 42 and 34-35 Hen. VIII. cap 8) had to be passed, and these regulations appear to be long accusations against the authorised doctors. The statutes suggest that the certified physicians poisoned their clients just the same as the wandering herbalists, but the chartered practitioners collected far more money for doing so than the itinerant herb-sellers.

As one act comments:

"Mynding oonlie (= only) ehyre (= their) owne lucre (= lucre = money), and nothing the profits or ease of the diseased or patient, (they) have sued, troubled and vexed divers honest persones as well men and woomen, whome God hathe endued with the knowledge of the nature, kinde, and operacion (= operation) of certeyne (= certain) herbes, rotes (= roots) and waters . . . and yet the saide persones have not taken anything for theyre peynes (= pains) and cooning (= cunning = skill) but have mynistred (= ministered) the same to the poore people oonlie for neighbourhode (= neighbourhood) and Goddes (= God's) sake, and of pite (= pity) and charytie (= charity); and it is now well knownen (= known) that the surgeons admytted (= admitted) wool (= will) doo no cure to any persone, but where they shall knowe to be rewarded with a greater soome (= sum) or rewarde than the cure extendeth unto, for in cace (= case) they wolde (= would) mynistrer theyre conning to sore (= sick) people unrewarded, there shoulde not be so manye rotte (= rot) and perishe to deathe for lacke of helpe of surgery as daillie doe."

In addition, in spite of the examinations by the Bishop of London, "the most parte of the persones of the saide crafte of surgeons have small conning;" con-

Medical research proclaims penicillin as the "antibiotic of choice" and consumer tests indicate that Cilicaine Suspension is the penicillin preparation of choice.

Doctors regularly prescribing Cilicaine Suspension appreciate its following advantages:

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sequently, all the king's subjects who have "by speculation or practise" knowledge of the virtues of plantes, roots and medicinal or healing waters, may, as before, notwithstanding the regulations to the contrary, cure all maladies on the surface of the body, by means of plasters, poultices and ointments, "within any parte of the realme of England, or within any other of the kinges (= king's) dominions."

It was a radical change. The secrets of the village herbalists were no longer considered to be the secrets of sorcerers.

Such formulas were the precious recipes which the herbalists said they had received from God by initiation. The poor, exposed to die without the help of a doctor or physician, rejoiced as the itinerant herbalists and village "medicine-men" breathed again!

The wandering herbalist continued to flourish together with the vendor of medicinal potions and ointments. That bold pedestrian, Ben Jonson, who, stick in hand, set out from London to walk to Scotland for pleasure, who knew so well the usual cheapjacks attending English fairs, in his "The Fox" (Act II, scene i), printed in 1605, has provided the portrait of a quack doctor of his time. Certainly the picture is that of a Venetian of the seventeenth century, but the same type of man is still to be seen in the fairs of England and other countries even in this century. Jonson's cheapjack is much the same as the herb-seller whose sales-talk had been recorded by Rutebeuf nearly four centuries before.

During his many visits to Smithfield fair in London the dramatist must have heard many a cheapjack call out, in inspiring tones, with his eyes turned towards heaven:

"Oh, health! health! health! the blessing of the rich! The riches of the poor! Who can put these at too dear a rate, since there is no enjoying the world without these?"

Then Jonson's charlatan ridicules the recognised physician of the early seventeenth century by boasting of his incomparable panaceas, in which he uses a little human fat, which is worth a thousand crowns, but which he will sell for eight crowns, no, for six—and finally, for sixpence!

Yet he affirms a thousand crowns was what Cardinals Montalte and Farnese and his friend the Grand Duke of Tuscany have paid him, but, for himself, he despises money, and is prepared to make sacrifices for the humble people.

He also has a little of the famous powder which gave beauty to Venus and to Helen of Troy. This had been found in the ruins of Troy by one of his friends who had sent him the treasure-trove. The friend had sent a little to the French court, but that portion had become "sophisticated," so the ladies who used it could not obtain such good results.

Three years later, when Thomas Coryat visited Venice in 1608, although he did not know Jonson's comedy, he says, in his "Crudities," first printed in 1611, that he marvelled at the activities of the mountebanks or cheapjacks who sold "oyles (= oils), soueraigne (= sovereign) waters, amorous songs printed, apothecary drugs, and a common-weale (= commonwealth) of other trifles . . . I saw one of them holde a viper in his hand, and play with his sting a quarter of an houre together, and yet receive no hurt. . . . He made us all beleve, that the same viper was lineally descended from the generation of the viper that lept out of the fire upon St. Paul's head, in the island of Melita, now called Malta."

The sales-talk had not changed very much in three centuries; it has not changed very much in the three centuries since the publication of Coryat's book!

CERTAIN FOOD ADDITIVES LISTED AS SAFE BY F.D.A.

A list of 188 food chemicals, generally regarded as safe for their intended use, has been proposed by the Food and Drug administration for exemption from testing required by law. The list appears in the Federal Register, December 9, 1958, pp. 9516-9517, along with regulations proposed in compliance with the 1958 Food Additives Amendment to the pure food law.

Including some already sanctioned for use, the group comprises 61 preservatives, 39 buffers and neutralisers, 35 nutrients, 5 non-nutritive sweeteners, 5 colouring agents, 5 stabilisers, 4 emulsifiers, and 34 other additives. Thirty-six are limited as to quantity or foods in which they may be used. Other chemicals may be added if they meet the legal criteria.

The proposed regulations take into account that a chemical might be both a new drug and a food additive, in which case only one petition need be filed.—Public Health Reports.

HIGHLIGHTS OF THE SOCIAL SECURITY AMENDMENTS OF 1958 (U.S.A.)

The Social Security Amendments of 1958 (1a) signed by the President on August 28, 1958, will affect almost every American family both in benefits and in taxes. They will implement further the basic principles of the public assistance titles of the Social Security Act as expressed by Congress in the amendments enacted in 1956:

1. To help the aged attain self-care.
2. To help the blind and disabled attain self-support or self-care.
3. To help those responsible for dependent children to maintain and strengthen family life.

The amendments provide for increased benefits to old-age, survivors, and disability insurance recipients; higher social security taxes for workers and their employers and for the self-employed; an increase in the maximum earnings base for social security taxes and benefits; changes in eligibility requirements which will extend coverage to many individuals and families particularly in disability payments; increased flexibility of Federal participation in State-operated public assistance programmes for the aged, blind and disabled, and for dependent children; increased appropriations authorised for each of the three programmes under title V of the Social Security Act (maternal and child health, crippled children's, and child welfare services); and extension of welfare services to children in urban areas on a par with children in rural areas.

Provision is also made for the establishment of advisory councils on child welfare services and on public assistance, similar to the existing Advisory Council on Social Security Financing.

The major amendments are summarised in the following paragraphs.—Public Health Reports.

CANCER DRUG

U-8344, an Upjohn Company anti-tumour drug, has been tested clinically in 75 patients, with encouraging results against lymphomas and chronic leukemias; it seems to work even after resistance to other drugs has developed and against fast growing tumours. Toxicity is low even after six months of treatment, and preliminary study has begun with solid tumours, usually unaffected by other drugs.

U-8344 is 5-bis(2'-chloroethyl)-aminouracil and shows a wide spectrum of activity in animals against Walker 256 carcinoma, Murphy Sturm lymphosarcoma, Shay myelogenous chloroleukemia, Sarcoma 180, Leukemia L-1210 and Carcinoma 755. Tumours remaining after therapy seldom resume growth. Using minimum effective doses of the chemical, toxicity seems almost negligible. No cardiovascular or autonomic activity or effect on the liver was exhibited, but prolonged use caused slight bone marrow depression and leukopenia. The drug can be administered orally or intraperitoneally.—"Drug and Cosmetic Industry."

Prescription Proprietaries and New Drugs

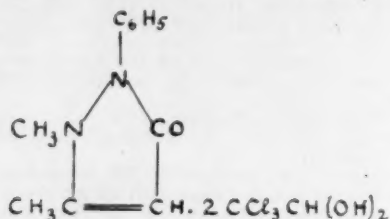


By
Geoff K. Treleaven, Ph.C., F.P.S

PHARMACEUTICS DEPARTMENT,
VICTORIAN COLLEGE
OF PHARMACY

A CHLORAL HYDRATE TABLET DICHLORALPHENAZONE

Dichloralphenazone is a molecular complex of chloral hydrate and phenazone produced by the interaction of two moles of chloral hydrate with one mole of phenazone:—



Chloral Hydrate is a hypnotic and sedative with a wide margin of safety. The molecular complex of Dichloralphenazone is free from the disadvantage of the nauseating taste and odour which somewhat restrict the general use of chloral in practice. Gastric irritation also does not generally occur with Dichloralphenazone.

In Dichloralphenazone all the hypnotic and sedative effects of chloral hydrate are retained as well as the mild analgesic properties from the phenazone.

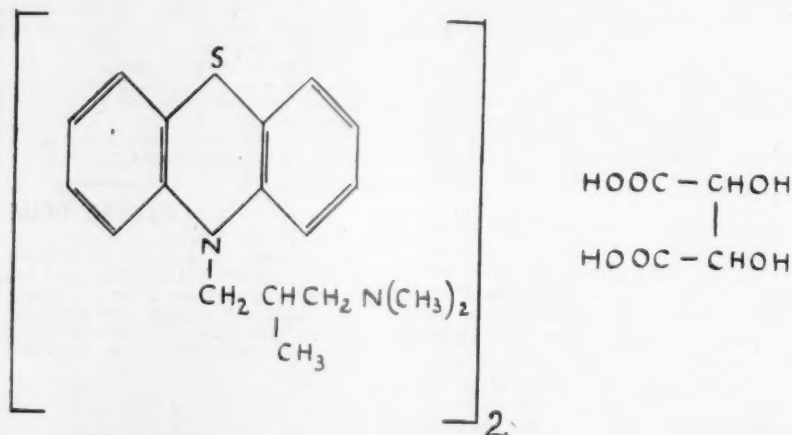
Uses: Dichloralphenazone is used for the night-time sedation of all age groups; it is valuable in obstinate cases of sleeplessness associated with anxiety, hyperexcitability or mild pain and may be used with greater latitude (although

still with caution) than other hypnotics in the presence of kidney or liver impairment. As a daytime sedative in conditions of stress or nervous tension.

Proprietary Preparation: Dichloralphenazone is marketed as scored tablets of 10 grains under the name of BONADORM (overseas "Welldorm")—Smith & Nephew.

TRIMEPAZINE TARTRATE A NEW ORAL ANTI-PRURITIC DRUG

Trimeprazine is dl-10-(3-dimethylamino-2-methylpropyl) phenothiazine neutral tartrate and has the following structural formula:



Trimeprazine is a new phenothiazine derivative which can be regarded pharmacologically as being intermediate between promethazine and chlorpromazine. It has, to an even greater degree, the antihistamine action of promethazine and, at the same time, central actions—including anti-emetic—like those of chlorpromazine, but is largely devoid of the latter's anti-adrenaline action. In addition it has a powerful spasmolytic action. These pharmacological properties of trimeprazine have led to its clinical study, in the first instance, as an oral antipruritic, and as an oral premedication in children about to undergo anaesthesia.

Proprietary Preparation: Vallergan (M&B) as tablet (10 mg.) and also as Syrup (7.5 mg. per fl. drachm) and Syrup (Fort) (22 mg. per fl. drachm).

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Papaverine
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Each fluid ounce contains pholcodine gr. 1/2 and papaverine sulphate gr. 1/5 in a very palatable flavouring.

Pholcodine is effective in controlling unproductive cough in children and in old age. It is less toxic than codeine and its side effects are also less.

Papaverine has a useful anti-spasmodic effect in bronchial spasm.

Dosage and administration:

Infants: Up to one-half teaspoonful according to age.

Children: Up to one teaspoonful according to age.

Adults: Up to two teaspoonfuls.

**Three times a day
and double dose at night**

Pholcodine:

"Young children tolerate daily doses of 10 to 40 mgm. without side effects, and for paediatric work pholcodine would appear to be far safer than codeine."—Cooper, P., *The Pharmaceutical Journal*, 1954, 465.

"It is less toxic than codeine and is effective in smaller doses. It is well tolerated by infants and children and does not cause constipation or digestive upset."—*Martindale*, 24th Ed., Vol. 1, p. 935.

Papaverine Sulphate:

"Dose 2 to 4 gr. . . . It is said to be non-toxic in single doses up to as much as 1 gm."—*Martindale*, 23rd Ed., Vol. 1, 792.

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irrational concept:

"a nasal decongestant must hurt to help" It is amazing how many patients cling to this mistaken belief and even measure the effectiveness of a nasal decongestant by the sting, burn and irritation produced. Actually, these side effects are signs of inferiority — resulting from inability to separate therapeutic potency from undesirable local reactions.



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Readers' Views

To the Editor.

These columns are open for the free discussion of any matter of general interest to Pharmacists. Letters under a nom de plume may be published; but each correspondent must furnish his name and address as an evidence of good faith. It must be distinctly understood that the opinions expressed by our correspondents are not necessarily endorsed editorially.

STAFF TAX DEDUCTIONS

Sir,—May I draw the attention of your readers generally to a short informative article on pages 410-411 of your April issue re Long Service Leave obligations and Tax Deductions on "Leave" payments.

Such appears under the Vic. section of "Commonwealth and State News"; probably the first part of the article is based primarily on Victorian law (and may not altogether apply in other States); but the notes as to Tax Deductions on "leave" payments should be noted by all employers, whether in Vic. or elsewhere.

Such article to some extent amends earlier information on tax matters published in your Sept./Oct. '58 issues of the Journal. It should particularly be noted that unless the employee is retiring on the occasion of drawing in a lump sum his "Long Service Leave"—or the value of the "Leave" is being paid subsequent to the death of the employee—tax deductions must be made on the same basis as applies to the ordinary Annual Holiday pay. The employer has no authority to make any tax deductions on payment of monies due to the Estate (or representatives) of a deceased employee. Yours, etc.,

I. L. WAUGH.

FIRST ANNUAL N.H.S. REPORT ON ILLNESS IN U.S.A.

The first annual report on illness, injuries and physician visits in the United States has been issued by the U.S. National Health Survey, Public Health Service, based on interviews covering 36,000 homes and 115,000 persons during July 1957-June 1958. The continuing survey, authorised by the 84th Congress, is conducted among both institutional and non-institutional segments of the civilian population, but this report presents major findings only for the non-institutional segment. The following are some highlights of the report.

There were 3370 million days of restricted activity due to illness or injury, or 20 days per person per year. Days in bed because of illness or injury numbered about 1310 million, or an average of 7.8 bed-disability days per person a year.

About 438 million cases of acute conditions occurred during the year, with respiratory illnesses ranking first and injuries second as a cause of work-time loss. The 284 million respiratory illnesses included colds, pneumonia and influenza. In this incidence Asian influenza figured prominently. The incidence of acute conditions was slightly higher among females than males and decreased with age.

Although tabulations for chronic conditions were incomplete, the data showed that circulatory conditions caused 484 million days of restricted activity, 167 million days of bed disability and 69 million days of work loss.

Physician visits were estimated to be 890 million, about two-thirds in offices, and more in the October-December quarter than during any other period. The survey estimated about 4000 visits per doctor, based on 220,000 practising physicians.—Public Health Reports.

Overseas News

GREAT BRITAIN

London, May 8, 1959.

Selling from Automatic Machines

The Council of the Pharmaceutical Society has authorised the publication of the following statement: The use of automatic machines placed outside pharmacies for the supply of goods when the premises are closed appears to be on the increase. It will be recalled that the Pharmacy and Poisons Act, 1933, prohibits the sale of poisons from an automatic machine. The Council considers that medicines, whether poisons or not, are unsuitable for the supply in this way on the ground that the supplier has not control over the circumstances in which the public may purchase them, contrary to the principles which should govern pharmaceutical practice. Any pharmacist who is using an automatic machine for the sale of medicines is therefore advised to discontinue the practice.

Selling by this means is not widespread in Britain, but there are indications that it is on the increase, and the Society is "grasping the nettle" in its early stages.

Society's Affairs

May is the chief month of pharmaceutical activity in Britain, as the Council election, Annual Meeting and Branch Representatives' Meeting all take place within the third week of the month. This year ten members have agreed to go forward to the poll for seven seats. One new member at least is certain on the Council, as Past-President F. G. Wells decided not to accept nomination. During June the Society will commemorate the centenary of the death of its founder, Jacob Bell. An exhibition of material associated with him will be held during the month.

Sex Hormone Warning

As a result of investigations by the Agricultural Research Council into the effects and uses of synthetic oestrogens the Ministry of Agriculture has stated that: "There is no apparent risk of damage to the animals when the drugs are used on beasts intended for slaughter in the dosages recommended by the manufacturers. When animals change hands it is always possible, however, that they may be treated more than once, and overdosing might lead to some undesirable side effects and possibly render the meat less attractive, although not dangerous to the consumer." Since oestrogens in certain circumstances caused sterility, the use of those substances on animals not intended for slaughter was to be avoided, the announcement added. The hormones could have a serious toxic effect on man when small amounts were swallowed or even inhaled, and attention was drawn to the dangers of home mixing of those materials with other feeding stuffs on the farm. A warning was also given as to storage and, in particular, to keep the substances well away from children.

Group Hospital Pharmacists

The Minister for Health has issued a memorandum to hospital authorities which recommends the appointment of group hospital pharmacists. It is also stated

that the Minister considers that often pharmaceutical skill is not being economically used and that there is a need not only for a better distribution of pharmacists but also for the wider employment of assistants and other ancillary staff. Individuals in these categories could be made responsible under supervision for processes and duties not requiring the personal attention of a pharmacist throughout, thereby enabling the pharmacist to concentrate to a greater extent on the duties which he alone could perform. The duties of the group pharmacist, in addition to those which would fall on him as chief pharmacist of his own hospital, should include: (a) responsibility to the Hospital Management Committee for the pharmaceutical service in the group, with authority to allocate pharmaceutical work between hospitals; (b) advice on policy, e.g. in regard to manufacturing, centralised storage, etc.; (c) building up an appropriate and balanced staff of pharmacists, assistants-in-dispensing and others; (d) transfer of work within the Group as needed; (e) co-ordination of pharmaceutical supplies, in consultation with the Supplies Officer. The appropriate salary allowance for a group pharmacist will be considered by the Whitley Council.

Report on Prescribing Costs

The Scottish Committee on prescribing costs has now issued its report which states categorically that there is unnecessary and excessive expenditure on drugs and dressings, attributable to prescribing practice. Many suggestions are made on methods of achieving economy, but the Committee is of the opinion that the solution does not lie in excessive interference by the State, a procedure which would be costly and cumbersome to enforce, and might well defeat the main purpose of the Health Service. The doctors' ignorance of costs is the root of the problem. All members of the profession must gain a more complete knowledge of costs and possess a sharper realisation of the need to protect the public purse.

Students should have instructions in economy in prescribing, and all medical schools should send their students to work with a general practitioner. General practitioners should be urged to use the British National Formulary as a basis for their prescribing, and local medical committees should assist in promoting its use. When a general practitioner's costs are over 50 per cent. above the average for two consecutive issues of prescribing statistics, then automatically a panel appointed by the Secretary of State should investigate his costs and recommend the withholding of remuneration if excessive prescribing is found. Local medical committees should meet local pharmaceutical committees regularly. The pharmacist has a special knowledge of drug data and new preparations, and pharmacists would receive information from prescribers on the choice of brands which they should stock. In the hospitals there should be Prescribing Committees, and these should consider requiring junior doctors to obtain the counter-signature of the chief of the unit on prescriptions for unfamiliar expensive drugs. It is also recommended that the Central Health Authority should invite, and if necessary compel, manufacturers to include in all printed advertisements the Cohen category, the approved name and the price of their products enclosed in a uniform and distinctive device. The Department of Health should investigate the possibility of restricting duplication of drugs by an amendment of the Law. The Committee deprecated the tendency to the needless duplication of proprietary drugs for the reason that it tended to complicate and confuse prescribing, and to render more difficult the doctor's task of maintaining an up-to-date knowledge of the new drugs available to him. Among bodies who submitted evidence to the Committee were the Association of British Pharmaceutical Industry, Bayer Products Ltd., the British Pharmacopoeia Commission, the Pharmaceutical General Council (Scotland) and the Scottish Department of the Pharmaceutical Society of Great Britain.

Statutory Committee Report

The Statutory Committee which is concerned with the ethics of the profession, and whether in the light of their conduct individuals and businesses are fit to remain on the Register, has issued its annual report for 1958. In all 48 cases were considered, as against 35 in the previous year. The increase is entirely due to cases relating to the advertising of dispensing services. These totalled 16, and two of them were directed to be made the subject of public inquiry. Only one pharmacist's name was removed from the Register, and three cases were adjourned without a decision being reached, but to be reviewed at the end of a period of one or two years.

The Drug Bill

The final summarised accounts of the National Health Service for 1957-58 have now been published. The net sum paid during the twelve months to pharmacists in England and Wales was £51 million, and they received another £10.77 million from patients' charges. The ingredients accounted for £38 million, the "on-cost" was £9.5 million, and dispensing fees totalled £12.79 million. There was a further £1.35 million for containers, and rota services absorbed £290,289. These figures do not include the cost of medicines dispensed in hospitals, nor the £1.9 million paid to dispensing doctors. Scottish pharmacists received in all £7.2 million, of which £1.1 million came from patients' contributions. The ingredient cost was £4.3 million, with an "on-cost" of £1.09 million. Dispensing fees, which are on a slightly higher scale than in England, accounted for £1.69 million, and the container allowance was £173,000. The payments generally were higher than those made in the preceding year.

Public Relations in Industry

Dr. Thomas Kerfoot, President of the Association of British Pharmaceutical Industry, recently addressed the U.S. Pharmaceutical Manufacturers' Association on how the public relations programme worked in Great Britain. He said that criticism of the British pharmaceutical industry had largely stemmed from ignorance, and the Association had tried to meet it by making the industry's achievements better known. The storm of criticism had blown up slowly, and it had not been until about 1951 that it had gathered force and found the industry with divided opinions. There were those who had said "something has got to be done about it," there were those who said "at all costs keep quiet, anything that may be done will only make matters worse;" and there were those who said "why should we do anything to help our competitors who are in trouble?" At the end of 1956 the Association had succeeded in getting agreement on a public relations programme spread over at least four years, and to the raising of a fund to pay for it, and to the formation of a committee to supervise and control policy. A firm of public relations consultants had been engaged, and in August, 1957, work had been started. The public relations consultants were sent round the industry to explain the principles on which it was proposed to work, to ensure active co-operation based on mutual confidence, and to allay doubts and fears. The consultants were to learn all they could about the industry. All companies were reminded that one inadvertent piece of commercial malpractice could bring the whole industry into disrepute, and they were invited to make as sure as possible that nothing they might do would be an embarrassment. It was not a question of "moving bulky facts out of the way," but of creating an informed and co-operative atmosphere within the industry's own ranks. The general policy had been the quiet, informative approach, concentrating on Members of Parliament, the professions and public opinion leaders generally. Informal meetings with Members of Parliament

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CORRECTED EPHEDRINE FOR USE AT NIGHT

Racemic Ephedrine Hydrochloride	1/2 gr.
Homatropine Methyl Bromide	2.5 mg.
Quinalbarbitone	1½ gr.
Butobarbitone	1 gr.
Phenobarbitone	1/3 gr.

In each distinctive green tablet.

For prophylaxis and relief in bronchial asthma, hay fever and other severe allergic reactions, and provides controlled sedation throughout the night.

	Wholesale	Retail
Tubes of 25	6/- ea.	9/- ea.
Bottles of 100	18/- ea.	27/- ea.



FAWNS & McALLAN
AUSTRALIA

THE PROVEN TREATMENT FOR DIAPER RASH



For more than ten years DIAPARENE products have been proved and accepted in the U.S.A. and Canada not only as a remedy, but as a preventive, for diaper rash — an ammonia dermatitis encountered in infants and young children.

The cause of diaper rash is ammonia liberated in the wet diaper by bacterial decomposition of urinary uric acid. The odour of ammonia is readily detected in diapers wet with urine.

Tests conducted by the Departments of Pediatrics and Bacteriology, New York Medical College, show Diaparene combines a high bactericidal effect against *B. ammoniagenes* with no irritation of the infant's skin.

Forty-nine of 50 infants treated for ammonia dermatitis were cleared within one week by impregnating their diapers with DIAPARENE.

Strong appeal to every mother

Many mothers regard ammonia dermatitis as "something every baby gets". Their discovery of Diaparene's curative and preventive action always produces enthusiastic and grateful response.

Every mother needs your advice — every baby needs Diaparene. And remember, each baby will remain your customer for at least two years because Diaparene is a prophylactic as well as a cure.

Skin care for incontinent adults

Diaparene is widely used among Canadian and American hospitals for treating ammonia dermatitis caused by senility and incontinence in aged and bed patients.

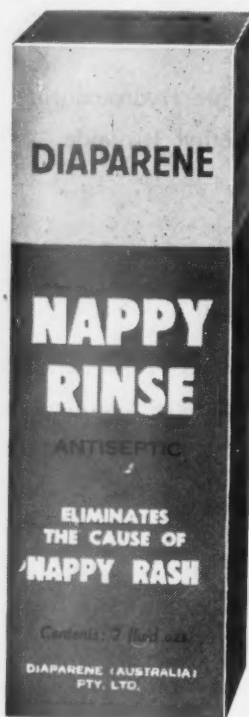
Hospital tests have shown that skin lesions are prevented, odours are eliminated and the morale of patients rapidly improves.

Application of Diaparene is simple. Diapers and bedding may be rinsed in Diaparene solution, or Diaparene lotion or ointment may be applied as required to skin and clothing.

HIGH PROFIT MARGIN—CHEMIST ONLY



FOR SKIN IRRITATIONS. Diaparene Ointment is a quick acting antidote against the harmful bacteria from urine, stool and perspiration. It is soluble with urine and thus reaches and acts on all parts likely to be affected. Price to consumer — 4/9.



PREVENTIVE ACTION
Diaparene Diaper Rinse stops the formation of the harmful bacteria responsible for diaper rash. Use should be recommended in the final rinse for all babies' nappies. Price to consumer — 4/9.



SOOTHES, SOFTENS, HELPS PROTECT BABY'S TENDER SKIN
Used at each bath and nappy change, Diaparene Baby Lotion leaves the skin soft, soothed and protected against the harmful ammonia-forming bacteria. It effectively guards against prickly heat and chafing. Price to consumer — 5/6.

ORDER FROM YOUR WHOLESALER

Distributors: Salmond & Spraggon (Aust.) Pty. Ltd. All States

both in the House and out of it had been organised. Talks had been given to members of the professions, and a series of brochures were being sent to opinion leaders throughout the country. The Press and radio had found the industry to be "hard news" and had featured the industry in a number of special supplements in the daily Press and in several radio and television appearances. The industry had not so far had to face the threat of "hostile legislation," but it was well aware that a quietly conducted prophylactic campaign based on the simple premise that the industry was doing a good job might well forestall or mitigate such legislation. The industry had tried to approach Members of Parliament on a non-party basis. Occasions had been sought on which a number of leading members of the industry could meet a number of Members of Parliament informally. It had also been made known that the industry was entirely at the disposal of either of the major parties' health committees should they desire smaller meetings at which questions could be asked of the industry. By this means the industry was able to get together at the end of 1958 Members of Parliament of both parties, invited on the basis of their representing constituencies in which units of the industry were situated. The Civil Service in Britain being to all intents and purposes permanent, the Civil Servant while remaining above suspicion of promoting individual interest could afford to and did meet with representatives of various interests perfectly openly. Indeed, such liaison was absolutely essential and the need for it was mutually understood. Both needed information. No Ministry could be familiar with all the technical details of every facet of its department, the industry could not afford to neglect a Department as a source of information on both administrative details and government policy.

Efficiency in the Service

A council to "advise generally on measures for improving efficiency in the National Health Service" is to be set up by the Ministry of Health. Mr. Derek Walker-Smith, announcing this, said that the individuals invited to serve have been selected because of the personal contribution they can make as a result of their experience in the hospitals or in the promotion of management efficiency in other fields. The Chairman is to be Sir Ewart Smith, who is Deputy Chairman of Imperial Chemical Industries Ltd. Thirteen other members have been nominated and these include Mr. M. W. Perrin, Chairman of the Wellcome Foundation; Professor T. E. Chester, of the Social Administration at Manchester University; Professor Sir Arthur Thomson, who is Dean of the Faculty of Medicine at Birmingham University; and Sir Edward Thompson, who is Chairman of an engineering firm.

Unusual Price Cutting Claim

Since the Restrictive Trade Practices Act came into operation there have been several actions in the Courts to prevent price cutting, and among the firms concerned the Beecham group have been anxious to ensure that their products were sold at full retail prices. An unusual action was heard recently in which Beecham's Foods Ltd. endeavoured to obtain an injunction restraining a grocery firm from selling Lucozade at less than the fixed retail price of 2/9 for a 26-oz. bottle. The defendants, who were alleged to have sold two bottles for 2/7 each, resisted the claim. They said that, as a 3d. deposit was charged on each bottle, the proper retail price was 2/6 a bottle, so that they had not sold below the controlled price. Mr. Justice Vaisey said of the defendants: "They might be described as cut-price grocers, without any offence in a free country." The label on the bottle was marked in bold figures 2/6, followed by a statement in less bold characters, "plus 3d. deposit returnable on bottle with stopper." Each of two women who effected a test purchase from the

defendants, paying on each occasion 2/7, might fairly be said to have paid the full and correct price of 2/6 for the liquid but only a penny for or towards the hire of the bottle. The provision in the Restrictive Trade Practices Act, 1956, under which the action was brought, applied only to sales, and the bottles in respect of which the 3d. was claimed were, so far as his Lordship could see, never sold at all to a customer. They were merely lent or hired as a convenient receptacle for carrying the liquid home. The moral was that if people wanted to fix prices for retail sales "they must do so in plain, simple and sensible, and, above all, accurate language," the Judge added.

Wellcome Research Laboratories

The first two stages of the five-year development plan of the Wellcome Research Laboratories was opened by Sir Henry Dale, O.M., F.R.S., Chairman of the Wellcome Trust, on May 1. The work is being carried out in three stages and will cost over £2 million. The first stage was the provision of the poliomyelitis vaccine, now producing four million doses per year, and the second stage includes buildings for virus work and for anaerobic bacteriology. The principal virus vaccines are for yellow fever, influenza, canine distemper and canine hepatitis. Production of yellow fever and canine distemper vaccines is already in full swing.

Run on Poliomyelitis Vaccine

The apparent apathy to vaccination against poliomyelitis in the 15-25 age group is tending to disappear, perhaps because a well-known footballer, Mr. Geoffrey Hall, in his late 20's, died from the disease during March. After the unexpected rush the Ministry of Health was accused of maldistribution of the vaccine. The Minister of Health, Mr. Walker-Smith, maintained that the delay had been slight, and anyone who had been forced to wait could in fact have been vaccinated months ago. The vaccine was allocated on the basis of monthly requests from the local Health Authorities, and the unexpected demand had caused them to ask urgently for additional supplies. Requests had been met, and an additional million doses had been distributed. Further large supplies were to be issued during May, including some imported Salk vaccine. Dr. Salk has been attending the Conference of the Royal Society of Health at Harrogate, Yorkshire. At a Press Conference, Dr. Salk declined to associate himself with any sensational developments in cancer research, which he said was being tackled from many different angles. At present he was carrying out work on the possibility of using chilled virus vaccines in place of live virus vaccines for such diseases as smallpox and yellow fever. He was also investigating the possibility of using a single vaccine against a combination of diseases, and mentioned poliomyelitis, tetanus and diphtheria. The preservatives used in these different vaccines were a temporary stumbling block against combining them.

DETERMINATION OF WATER BY THE KARL FISCHER METHOD

The Standards Association of Australia submits for public review and comment a proposal to endorse B.S.2511-1954, Determination of Water by the Karl Fischer Method, without amendment. A number of S.A.A. committees has had occasion to make cross-reference to this standard, and the indications are that the method as set out in the British standard is widely used in Australian laboratories.

Comment as to the suitability of the British standard for endorsement for Australian purposes is invited from laboratories which have had experience in the determination of water by this method. Comment should be forwarded to the headquarters of the Association, 157 Gloucester street, Sydney, or to branch offices in capital cities and Newcastle. Copies of the British standard may be purchased from or examined at any of these offices.

STANDARDISATION OF TABLETS

The standardisation of tablets has been an ever-increasing problem from the time this form of medication started to gain popularity.

Although tablets were included in the British Pharmaceutical Codex as early as 1923, it was not until 1945 (Seventh Addendum to the B.P. 1932) that they became official in the British Pharmacopoeia.

As early as 1936 the British Pharmaceutical Conference discussed the problem of variations in tablet sizes, and in 1938 the Wholesale Drug Trade Association of Great Britain published for the use of its members a list of diameters and final weights for a number of tablets. The list was later extended and issued under the authority of The Association of the British Pharmaceutical Industry, with the end in view that manufacturers would accept these recommendations as standards.

The 1958 B.P. adopted standard diameters for a range of strengths of official tablets; in the majority of cases, these standards agreed with the earlier diameter recommendations of the A.B.P.I. The adoption of the B.P. standard diameters did not call for such a widespread change in Great Britain as was the case in Australia.

One Australian manufacturer some seven years ago adopted and published a list of diameters for a wide range of tablets, with a different diameter for each weight of active ingredient in a particular type of tablet. There were, however, no recognised standards in this country for the pharmaceutical industry as a whole, and individual manufacturers set their own standards. The same tablet was therefore available in a wide variety of sizes, and the pharmacist had either to restrict his sources of supply of a particular tablet or explain to the customer the variation from an earlier prescription.

The 1958 B.P. became official in Australia from September to December last, the dates of official recognition depending upon the respective State laws, but many manufacturers changed over to the new B.P. standard diameters as soon as these were available. In addition, many manufacturers were already making individual tablets to diameters which coincided with the new standards while, in some cases, tablet sizes not listed officially were altered in diameter to avoid confusion with a listed tablet.

The list of tablets which have been standardised, together with stipulated diameters, appears on page 965 of the B.P. 1958. The deviations from standard of:

- (a) plus or minus 5%, and
- (b) where the diameter is 10/32nds of an inch or more, an increase of 1/32nd of an inch

are reasonable and would not attract comment from customers.

Complaints from customers on variation in size of a particular tablet should now rapidly become more infrequent with the adoption of the new standards. Most customers will respond to an explanation that the change in size of the tablet they require has resulted from the introduction of official standard diameters to which all tablets listed must now conform.

Trade Notes

Mr. L. T. Cush has been appointed sales manager for Pharmedica Pty. Ltd., a subsidiary of the Chemical Holdings Group of Companies. Mr. Cush was on the detailing staff of Wyeth International for several years, and later joined British Pharmaceuticals Pty. Ltd., representing that company in a similar capacity.

BLEAKLEY'S NEW VICTORIAN ADDRESS

Following expansion of its business in Victoria, H. Bleakley Photographics Pty. Ltd. has moved to larger premises, which now house the general office, showroom and warehouse stores, at Charmor House, 241 William street, Melbourne, telephones 67-5540, 67-5548.

Mr. Arch Shepherd, manager of the Victorian branch, extends an invitation to Bleakley's clients to visit the new Victorian premises.

"STERIFLEX"

Allen & Hanburys (A'asia) Ltd. has notified the addition to its range of ethical products a range of Steriflex—Disposable Plastic Units for Infusion Therapy—complete with "Giving Set."

Steriflex is now available in Australia, list prices being: 1 litre, No. 1, 10/9 (with "Giving Set"); 1 litre, No. 3, 10/9 (with "Giving Set"); 1 litre, No. 6, 10/9 (with "Giving Set"); 1 litre, No. 18, 10/9 (with "Giving Set").

DEQUALONE-P

Dequalone-P Ointment is now being introduced to the market as a new ethical product, manufactured by Allen & Hanburys (A'asia) Ltd.

Formula: Dequadin (Dequalinium) Chloride 0.4%; Prednisolone 0.25%; in a bland non-irritating hydrophilic base.

Indications: Acute or chronic dermatoses with an allergic or inflammatory basis, partially those in which marked pruritus is present.

Presentation: Tubes containing 5 grammes.

Price: List 11/4; retail 17/-, plus dispensing fee.

JOHNSON & JOHNSON PTY. LTD. INTRODUCES BAND-AID ADHESIVE BANDAGES IN PACKS OF 100

Johnson & Johnson Pty. Ltd. has introduced this economy pack of 100 Band-Aid Adhesive Bandages, owing to the heavy demand for this product and the ever-increasing sales of the larger sizes, particularly the pack of 50.

The company considers that this new pack will be popular for office, home and factory use, and recommends chemists to display this economy size prominently for extra profits resulting from its sale and the anticipated increase in sale of 50's.

The profit to the chemist is in keeping with the high mark-up already provided for this line, being 71 per cent. on the 12 dozen assorted parcel.

The retail price is 8/9.

The company advises that Band-Aid Adhesive Bandages 100's will be nationally advertised on TV, radio and national magazines.

CYTAMEN "1000" MCGM.: SINGLE PACK

Glaxo Laboratories (Aust.) Pty. Ltd. advises that to conform with the requirements of the Pharmaceutical Benefits Regulations, Cytamen "1000" is now available in individual cartons of one ampoule at a trade price of 12/6 each.

P R E C O R T I S Y L

PREDNISOLONE

SKIN LOTION:

solution of prednisolone in a spray bottle

Quick and easy application

Economical:

wide application with
minimal quantity

'No-touch' application:

avoidance of pain, and
possible infection from
finger spreading



SKIN CREAM:

a vanishing cream of soluble prednisolone
in a water-miscible vehicle

PACKINGS

PreCortisyl Skin Lotion : 0.25% prednisolone in 20 ml.
plastic spray bottle

PreCortisyl Skin Cream : 0.25% and 0.5% prednisolone.
Tubes of 5 and 15 G.


LONDON, N.W.10

ROUSSEL PHARMACEUTICALS (PTY) LTD.,

Caltex House, 167 Kent Street, Sydney, N.S.W. Tel: BU 5597

Sole Distributors: **POTTER & BIRKS (PTY) LTD.**

LS/O/77

OPEN LETTER TO RETAILERS . . .

Dear Sir,

We take pleasure in informing you that we are announcing again a free bonus offer for both Andrews' BIOCITRIN Tablets and Syrup preparations, operating from 1st April until 30th September, 1959.

During this period we charge all retail chemists the undermentioned prices for orders of Tablets, Syrup or mixed, with the provision that a minimum of one dozen of each packing has to be ordered at a time.

For 1 to 5 dozen:	{ 44/- per dozen of 25 Tablets.
	{ 154/- per dozen of 100 Tablets.
	{ 44/- per dozen of 3 fl. oz. Syrup.

i.e., the price of 11 bottles for a dozen.

For orders of 6 dozen or more:	{ 40/- per dozen of 25 Tablets.
	{ 140/- per dozen of 100 Tablets.
	{ 40/- per dozen of 3 fl. oz. Syrup.

i.e., the price of 10 bottles for a dozen.

We have new posters for window display and these will be made available, naturally free of charge, on your request.

Finally, we wish to inform you that from April Biocitrin will be nationally advertised in the daily press, in trade publications, on the radio and on public conveyances.

Thanking you in advance for your co-operation, we remain,

Yours faithfully,

ANDREWS LABORATORIES PTY. LTD.

ANDREWS' BIOCITRIN

a new synergistic combination of

CITRUS
BIOFLAVONOID
COMPLEX
(VITAMIN P)¹

ASCORBIC
ACID
(VITAMIN C)

Recommended for the prevention and therapy of common cold, influenza and virus infections of the upper respiratory tract (URTI); to ensure normal permeability and integrity of the vascular system by protecting patients from capillary damage.

NOW AVAILABLE IN TWO FORMS:

IN TABLETS AND IN SYRUP

Each tablet and each teaspoonful contains

100 mg. of Citrus Bioflavonoid Complex

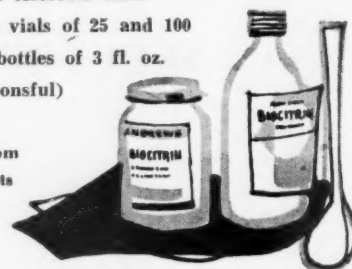
100 mg. of Ascorbic Acid

Tablets in vials of 25 and 100

Syrup in bottles of 3 fl. oz.

(25 teaspoonsful)

* Derived from
Citrus Fruits



Andrews Laboratories Pty. Ltd.

15 HAMILTON STREET. SYDNEY

MANUFACTURERS OF DRUGS AND FINE CHEMICALS

AL. 75C HP

These single ampoule packs are available in boxes of six at a trade price of 70/- per box.

NaClex: (Non-mercurial Oral Diuretic)

The company also announces that NaClex tablets are now available. NaClex tablets contain 50 mg. hydroflumethiazide, which is an analogue of chlorothiazide, but is stated to be much more active and to have fewer side effects than that compound.

NaClex is available as scored tablets in bottles of 12, 50 and 500. Prices are:—

	Trade Price	Retail Price
	Each	Each
12's	8/-	12/-
50's	28/-	42/-
500's	220/-	330/-

POCKET COMPENDIUM OF AUSTRALIAN STATISTICS

The 1959 issue of the Commonwealth Statistician's booklet—Pocket Compendium of Australian Statistics—has just been released at the price of two shillings, or 2/4, including postage.

Measuring less than 4½ in. by 3½ in., and weighing a mere 2 ounces, its compact form and wide range of topics will doubtless appeal to all who require general information on Australia and its people.

In particular, business men travelling overseas will find these little booklets valuable media for dissemination of information among their colleagues abroad.

The wide range of subject matter is illustrated by the following selection:—

Balance of Payments	Livestock
Banking	Minerals
Building	National Income
Crops	Oversea Trade
Dwellings	Population
Education	Price Indexes
Employment	Production
Food Consumption	Public Finance
Hire Purchase	Retail Sales
Hospitals	Transport
Insurance	Wage Rates

In addition, the Compendium lists the members of Commonwealth and State Ministries, Commonwealth Parliament, the Commonwealth Judiciary, also Australian Diplomatic and Consular Representatives overseas, Diplomatic Representatives of other countries in Australia and principal Commonwealth Officials.

A chronological table of principal events since Captain Cook's first voyage to Australia in 1770 rounds off a veritable mine of information packed into some 220 pages.

Copies are available from the Government Printer, Canberra, or the Commonwealth Sub-Treasury in each capital city.

"VALLERGAN" INTRODUCED BY M. & B.

May & Baker (Aust.) Pty. Ltd. announces the introduction of "Vallergan" brand trimeprazine tartrate.

Trimeprazine is a phenothiazine derivative pharmacologically intermediate between promethazine and chlorpromazine. Its antihistamine action is greater than that of promethazine, but its actions on the central nervous system resemble chlorpromazine. It has a stronger spasmolytic action but a weaker anti-adrenaline action than chlorpromazine.

"Vallergan" is indicated in the relief of pruritus in various dermatological conditions such as atopic dermatitis, neurodermatitis, chronic urticaria, and infantile eczema. Trimeprazine has also been found to be a useful oral pre-anaesthetic medication for children.

"Vallergan" is available as dark blue, sugar-coated tablets of 10 mg. and as a syrup containing 2 mg./c.c. An increased strength trimeprazine tartrate syrup containing 6 mg./c.c. intended particularly for pre-anaesthetic medication for children is available as "Vallergan" Forte. Packs and prices are:

	List Price
"Vallergan" tablets, 50 x 10 mg.	9/7
"Vallergan" syrup, 0.2%, 4 fl. oz.	6/8
"Vallergan" Forte syrup, 0.6%, 4 fl. oz.	12/11

Supplies will be available from usual wholesale distributors from June 1.

New Presentations

The company also announces that from June 1 the following presentations of "Perolysen" brand pempidine tartrate and "Nivaquine" brand chloroquine sulphate will be available:—

	List Price
"Perolysen" tablets, 50 x 1 mg.	3/9
"Nivaquine" Minor tablets:	
10 x 68 mg.	1/3
100 x 68 mg.	11/8
500 x 68 mg.	51/3
"Nivaquine" ampoules, 10 x 2 c.c.	10/-
"Nivaquine" syrup, 4 fl. oz.	10/5

FAULDING'S NEW RESEARCH AND BACTERIOLOGICAL LABORATORIES OPENED

On April 28 the Premier of South Australia, Sir Thomas Playford, officially opened the new Faulding Research Laboratories and the Bacteriological Division at Torrensidge, South Australia.

Recently extended and equipped at a cost of £150,000, the new laboratories, staffed mainly by Australian University graduates, provide what are claimed by the company to be the most modern facilities for investigating new therapeutic substances and improvement to production methods.



The Premier of S.A., Sir Thomas Playford, Mr. A. F. Scammell, Managing Director, and Mr. K. D. Johnson, Works Manager, of F. H. Faulding & Co. Ltd., inspecting one of the many rabbits which are used for Pyrogen tests.

F. H. Faulding & Co. Ltd. completed 114 years of operations on May 19. The managing director, Mr. A. F. Scammell, said at the ceremony on April 28 that the company's progress and high reputation were due in no small measure to the individual and loyal service of its staff.

The Premier said the research work being done by the House of Faulding was contributing to a great extent to the health and welfare of the people of Australia.

The official party was escorted over the new laboratories by the works manager, Mr. K. D. Johnson, accompanied by Mr. A. F. Scammell and Mr. M. R. Lodge (director), who thanked the Premier on behalf of the Board of Directors.

SIGMA COMPANY LTD.

Annual General Meeting of Shareholders

The annual meeting of the company was held at 589 Collins street, Melbourne, on April 30, 1959, commencing at 8 p.m.

Mr. C. P. A. Taylor, Chairman of Directors, welcomed shareholders, and called on the Secretary to read the notice convening the meeting.

After confirmation of the minutes of the previous annual general meeting, the chairman called for a motion that the balance-sheet, profit and loss account and directors' report be taken as read. Mr. G. E. Walker moved accordingly; the motion was seconded by Mr. S. M. Adams and carried.

The Chairman then elaborated on the printed report. He said the figures spoke for themselves. He then made reference to the paragraph under Management, concerning the decision of the General Manager, Mr. B. Haigh, to retire. This would be a great blow to those with whom Mr. Haigh had been associated through nearly thirty years of active association with Sigma Company. The Board respected his judgment in the everyday business of the company, and were happy that Mr. Haigh had had a remarkable run of good health during such trying years. It was hoped that his retirement would be blessed with continuity of good health, for both himself and his wife.

Mr. A. K. Hobbs, who had the full confidence of the Board, had been chosen as Deputy General Manager. He had cemented overseas contacts and friendships and enjoyed the respect of the staff.

Sales for the past year exceeded £5,000,000, and the company's finances had never been in a happier position than today.

The Chairman informed members that during the year Mr. Haigh revisited Japan, where he made further contacts and cemented earlier associations. It was planned that Mr. G. T. Peterson will journey to U.S.A. later this year. Mr. Ron Hobbs and Mr. Randolph Wilcock would also go overseas to gain knowledge of further developments concerning mechanised accounting and warehousing systems. The company expected teething troubles with the I.B.M. equipment for up to two years, and this had proved so. Only during the past few weeks had this installation been functioning almost completely satisfactorily. However, literature and information from America indicated that additional equipment was becoming available, and as delivery took two to three years, they were extending their knowledge before placing further orders.

With the elevation of Mr. A. K. Hobbs, Assistant General Manager Technical, to the position of Deputy General Manager, Mr. R. L. Chidgey had been appointed as Technical Manager, a position for which he was well qualified.

This year Mr. R. S. Wilcock attended the Summer School for business executives, and other members of the staff attended conferences and seminars with very beneficial results.

Regarding Sigma scholarships, the company had two very good scholars at Melbourne University at the moment. The first scholar, Denis Hogg, did very well in his first year's examination, and Bryan Toole, the appointee for 1959, was well equipped scholastically. These young men were committed to carry on for a brief period at Tromax at the completion of their courses, but it was felt that the company had enough to offer them to make them want to stay.

Country shareholders had benefitted greatly from freight concessions introduced during the year.

In the veterinary field Sigma had branched into a different angle co-jointly with Holdenson and Neilson. They had produced a foot-rot pack, "Sprot," which was marketed by Veterinary Specialties Pty. Ltd., a subsidiary company of Sigma, and sales will be through Holdenson and Neilson to veterinary surgeons, as well as through Sigma.

It was the intention of the Tromax Board to proceed with the planning of a new factory forthwith. Some eight or ten years ago they purchased ten acres of land at Clayton for £3000. About eighteen months ago they

were offered £30,000 for this property. There was some doubt whether ten acres were worthwhile holding, but after available land around that area and elsewhere had been inspected it was concluded that, all factors taken into consideration, their factory site could not be bettered. They concluded it should be developed, and that was now the focal point of their thoughts so far as Tromax was concerned.

They were now planning a factory which could encompass expenditure of £500,000. Messrs. C. P. A. Taylor, A. H. Mansell, A. K. Hobbs, R. L. Chidgey and the company's architect, Mr. L. Hume Sherrard, will visit Sydney shortly to inspect the most modern pharmaceutical factories in Sydney. The architect would co-opt technical and structural engineers' assistance to help in planning a pharmaceutical factory second to none and of which all could be proud.

During the year they prevailed upon Mr. F. H. Bedford to talk about what he had seen overseas, and he had now joined the Board of Tromax.

The chairman referred to the company's generous support of the appeal for the new College of Pharmacy at Parkville, and also said that at the moment they were in process of forming closer liaison with the University of Melbourne. A sum of £2500 per annum would be given to establish a research fellowship.

Their subsidiary company, Pharmaceutical Investments Limited, was formed during 1956 with capital of £500 contributed by Sigma Company, plus a £100,000 note issue, backed and guaranteed by Sigma. To date, total advances made by Pharmaceutical Investments Limited to their shareholders amounted to £335,250. Outstanding at the moment was the sum of £180,000.

The Chairman recalled the personal gesture last year by the General Manager, when he turned over £1000 of his salary to establish the "Ben Haigh Fund" for Staff Assistance. He had made it known that the same would apply this year. (Applause.) This fund had been instrumental in helping many Sigma staff members over financial difficulties during the year, and he invited donations to the fund from shareholders.

The Chairman remarked that because patents precluded the company from making or processing Oral Penicillin V, and as it was not fully geared up on research, they had to depend a lot on overseas laboratories, hoping they would be in a position to market products in Australia, no matter how new.

The Chairman then moved the adoption of the balance-sheet and profit and loss account for the year ended January 25, 1959. Mr. A. H. Mansell seconded the motion, which was carried unanimously.

Directors.—There being no other nomination, Mr. A. H. Mansell was re-elected to represent preference shareholders. Mr. Mansell thanked the shareholders for their expression of continued confidence.

Mr. C. P. A. Taylor offered himself for re-election to represent ordinary shareholders. There was no other nomination and Mr. Taylor was re-elected. Mr. Taylor thanked the shareholders for their continued confidence.

It was resolved on the motion of Mr. M. Whiffin, seconded by Mr. L. Walker, that the remuneration of directors be £2000 per annum, to be divided as they saw fit.

Messrs. Davey, Garcia and J. G. Davis were re-elected as auditors of the company, and their fee was fixed at 1600 guineas.

The Chairman then declared the meeting closed, and invited shareholders to engage in informal discussion.

Mr. Haigh thanked the Chairman for his gracious remarks earlier in the meeting, and commented that he had had a most interesting career with Sigma. He expressed his appreciation for the support he had received from shareholders, directors and staff, and forecast great things ahead of Sigma Company Ltd.

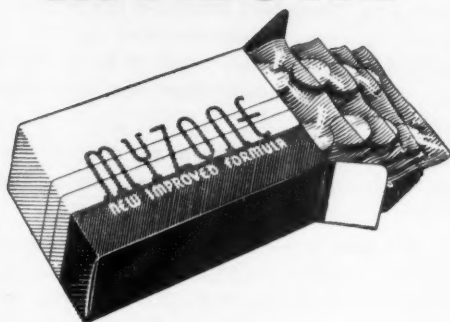
The Chairman informed the gathering that before the next annual general meeting shareholders would be given the opportunity to forgo and tangibly express appreciation to the General Manager.

The meeting closed at 9.10 p.m., after which supper was served.

STOCK BOTH FOR GREATER PROFITS

One Sale just naturally leads to the other

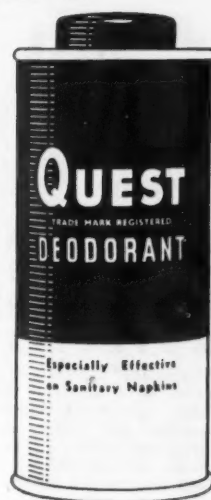
MYZONE



MYZONE Sales last year continued to climb. Advertising pressure is being maintained in all States and already chemists everywhere report continuing fine results, especially when MYZONE is displayed on the counter.

QUEST

Here is the natural follow-up to a MYZONE or sanitary product sale . . . QUEST Deodorant Powder compounded to be especially effective on sanitary napkins. Stock both MYZONE and QUEST to double your profits!



Ask your wholesaler **NOW** for these products

OR IF YOU
EXPERIENCE
DIFFICULTY WRITE
DIRECT TO

**RILEY
WILLIAMS**
PTY. LTD.

BOX 20,
P.O. FAIRFIELD,
VIC.

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NEW! SPECIALLY FOR FLU up to 60% PROFIT for you in "SAME-DAY"

COLD AND FLU TABLETS



BACKED BY SOLID NATION-WIDE PRESS AND RADIO ADVERTISING

"Same-Day" Tablets will be publicised by a powerful Australian-wide advertising campaign in popular and widely circulating press and leading journals. Radio stations all over Australia will also carry a continuous campaign of attention-compelling spot announcements at carefully selected times.

Synergised for greatest effectiveness, "Same-Day" Tablets—a new addition to the B.M.L. range of family medicines—have already been tried and tested on overseas markets with remarkable success and are certain to be one of your fastest-moving lines. You can stock and recommend "Same-Day" Cold and Flu Tablets with every confidence.

Solidly backed by the heavy radio and press advertising, these attractive orange-coloured, strip-packed "Same-Day" Tablets will prove a steady, profitable seller for you.

"Same-Day" Tablets cost you 52/- a dozen and selling at 6/6 carry a minimum mark-up of 50% for you, but, be wise! BUY IN PARCEL LOTS with other B.M.L. lines—FORD PILLS, MENTHOIDS, CURLYPET, PRESSOR SALT, etc.—and make EXTRA PROFIT of 2½% on £5 or over parcels, 5% on £7/10/- parcels and 7½% on £10 or over parcels. Remember! You can assort items as you wish. With the usual 2½% cash discount you can make up to 60% on "SAME-DAY" Tablets.

So, take advantage of the inevitable demand . . . take advantage of the high profit . . . stock and display "SAME-DAY" Tablets.

ORDER FROM YOUR WHOLEALER TO-DAY!



British Medical Laboratories Pty. Limited

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Student Activities

NATIONAL ASSOCIATION OF PHARMACEUTICAL STUDENTS OF AUSTRALIA

The Survey.—N.A.P.S.A. has just achieved another important step in its aim towards the improvement of studying and working conditions for pharmaceutical students throughout Australia. It has received permission from the Pharmaceutical Association of Australia to present the results of the educational and industrial surveys, at the Annual Conference in Adelaide, from May 25 to June 2. Unfortunately, due to unforeseen commitments, the Educational and Industrial Vice-President, Kevin Hassey, is unable to attend the conference to present his report. Similarly the President, Wai Williams, cannot participate. After much consideration and correspondence the honour has been given to Keith Horne, whom many members will remember. Keith was the editor for the pharmacy student in 1958. He is now qualified, and having full knowledge of the background of N.A.P.S.A., can present the results with assurance and satisfaction.

Office Equipment.—N.A.P.S.A. has bought a new Gestetner Duplicator since the last publication. It is a magnificent model, self-inking and able to duplicate letterheads and monographs, etc. In short, it has all the refinements of the dearest and most up-to-date models, with one exception, it is not electrically operated. However an electrically operated duplicator would be somewhat of a luxury, since the volume of work does not warrant such expenditure. In future roneoed copies of Bulletins, etc., will be readily decipherable and will not contain three-quarters of a page of misprints.

N.U.A.U.S.—Another big item on the agenda is the proposal by the National Union of Australian University Students that N.A.P.S.A. consider affiliation with them, subject to the new rule in their constitution which has been included to allow student organisations of a non-university institution to become affiliated with them under a national faculty. This proposal has caused quite a deal of comment and has brought forward many arguments which were not discussed at the last N.A.P.S.A. Conference, where this suggestion by one of the constituent organisations was defeated.

In view of the fact that so much is at stake in such a huge step, every aspect of the affiliation should be known to all students whether actively concerned with N.A.P.S.A. or not. It is thus up to you individually to find out all you can, for or against the move. If, then, we all have a full understanding of the situation and its far-reaching results, no one can be blamed for influencing the vote in any way. We have been given sufficient time to investigate all the possibilities and when the subject is again tabled at the next annual conference no excuses can be accepted for negligence.

N.A.P.S.A. is your association and its future is in your hands. You are directly responsible for its status and you alone can determine its victory or defeat!

—Trevor Cichero, National Publicity Officer, Brisbane.

W.A.P.S.A.

The much anticipated event has come and gone, the W.A.P.S.A.'s annual ball. What a ball! Any feeling regarding the weather was completely over-ruled by the beautiful setting chosen for the ball. It was held in the Cottesloe Civic Centre—originally the home of the famous financier, De Bernales. As is usual on such occasions the hours sped by and soon the strains of "For They Are Jolly Good Fellows" and such sentimental melodies were heard. The final good-byes were said and everybody went their separate ways, taking with them one more memory of a good time and perhaps a slightly benevolent glow.

The next big event in the students' calendar is the picnic-cum-car rally to be held on Sunday, May 24.

This event is always well attended and this year will be even bigger and brighter. This year there is the possibility that the prizes will be more valuable. This factor will naturally spur the competitors on to greater efforts. Just in passing, the fatted calf has been sacrificed for favourable weather, last year it rained so heavily that rather than being a car rally a boating expedition would have been more in order.

On the more serious side, the Western Australian clan wish to thank the Eastern State students who loaned their slides taken at Congress for slide evenings held earlier in the year. These evenings afforded a lot of pleasure and caused many a laugh.

—Tony Windsor, Western Australian L.P.O.

SYDNEY UNIVERSITY PHARMACEUTICAL ASSOCIATION

The Annual General Meeting of S.U.P.A. was held on April 3, at Sydney University. The S.U.P.A. annual report was presented and the reports of the two Congress delegates were read. The election of office-bearers for 1959 then took place.

Slides taken at the Congress at Araluen, W.A., were shown during the evening and were enjoyed by all present. After the meeting supper was served.

The office-bearers for 1959 are:

President: Peter Wildblood.

Vice-Presidents: Margaret Esplin, Kevin Hassey.

Student Vice-President: Steve Wayne.

Honorary Secretary: Maurice Lazarus.

Treasurer: John Farrell.

Text Book Officer: Margaret Esplin.

Editors of "Mortar Monthly": Marguerita Gregory and Phil Dart.

Local Publicity Officer: Patricia Hardie.

2nd Year Representatives: Mary Prendergast, Steve Wayne, Peter Wormald.

1st Year Representatives: Estelle de Boos-Smith, Carol Forsyth, Margot Woodward, Phil Dart.

2nd Year Secretary: Peter Wormald.

1st Year Secretary: Ray Bull.

Sports Reps.: Mary Prendergast, John Farrell, Warwick Landers, Gwen Hubbard.

The first activity for 1959 was the Annual Picnic held on April 25, at Garie Beach. As usual the weather was against us. About 30 students attended, comprising a few from Mat. Med and the majority from 1st year. About 10 students travelled by train and the remainder crowded into a couple of cars. After the picnic lunch, swimming and hiking were the main occupations. A lot of time was spent playing baseball on the beach. Despite the overcast weather the picnic was enjoyed by all.

At the time of compiling this report preparations are in hand for S.U.P.A.'s participation in the University Commemoration Day activities on May 5. This year Red Cross is the object of the Commem. Day Appeal. A few pharmacy students are very busy building a multi-coloured giraffe. This will be about 8 feet high and will be in the procession with the various floats. In order to raise money for the Red Cross, children will be given rides on the giraffe for one shilling.

Pharmacy hopes to have some representatives in the interfaculty sports to be held on Commem. Day.

The most important news this month is that Congress in Adelaide will be held from January 4-18, 1960. This will give Interstate students the chance to travel to Adelaide over the long week-end. So all those who are thinking of coming can now definitely book their holidays, as we expect to see a good crowd here. Watch this column for further news.

The Pharmacy Ball is our next big social function, and this will be held on May 16. It will be preceded by a cocktail party at Memorial Drive given by members of the committee.

On June 15, our Annual Car Rally will be held. This is being organised by our assistant secretary, Fraser McWaters, who did such a marvellous job of organising last year's rally. This will be followed by a barbecue dance at Waterfall Gully.—P. Hardie, L.P.O.

QUEENSLAND PHARMACEUTICAL STUDENTS' SOCIETY

The second term of the year is now well under way, and everyone is once again accustomed to college routine after a week's holiday. The holiday in many cases was very necessary as Commem. Day, the last day of the first term, turned out to be really hectic.

The pharmacy students' float, "Pharmacy Through the Ages," took part in the University procession, and although this was rather more chaotic than it was intended to be, at least pharmacy students entered wholeheartedly into the spirit of the day. After the procession many of our merry mob adjourned to the Botanic Gardens, where a car-packing demonstration was staged by some of our sturdier specimens. (Notice that it was a car, not a telephone box—we like to be different!) This caused quite a mild stir among some of the local yokels, and we were even favoured by the attentions of a press photographer, as well as several amateur snap-seekers. The number of people packed into that car must have been a world record at least, so after satisfying themselves about this, everyone moved off to other similarly uplifting pursuits. On the whole, Commem. Day was a memorable one for pharmacy students, which was only fitting, as it was perhaps our last fling (or one of the last) as a separate student body.

Next big event will be the Pharmacy Ball, to be held at Cloudland on May 29. This is one occasion when we really get together, and one of the rare opportunities for present students, country students and qualified chemists to mingle and really get to know each other. In past years it has always been a wonderful evening for everyone, and this year we are sure it will be every bit as good.—M.M.W.

TASMANIAN PHARMACEUTICAL STUDENTS' ASSOCIATION

April has been quite an interesting and active month for the students as we have had one excursion, a barbecue and a bottle drive.

The excursion was to Port Arthur and its "environs." About fifteen students attended this trip. First stop was Dunally, where we had to wait at the bridge while the bridge-keeper opened and closed it to let a fishing boat through. Lupa was our next stop, and here the shutter-bugs made themselves at home. After several films had been disposed of we were thinking of disposing of food. We visited Tasman's Arch, McDairl's Kitchen and the Blowhole. Into the latter several students ventured forth with the express purpose of taking photographs which, to my knowledge, have not been taken before. Conditions, comparatively calm sea and low tide—were favourable, otherwise we would not have attempted this, as several people have lost their lives around this spot.

During the afternoon we were shown around the model prison at Port Arthur, and three persons were accidentally (?) locked in one of the cells for a short time. Later we decided to visit the Remarkable Cave, which is about seven miles from Port Arthur, and after finding a dead rabbit and large clumps of seaweed, we returned to the cars, where an unorthodox game of baseball was held.

The barbecue was held on the week-end of April 26, and although the number of people attending was far below our estimate, a slight profit was made. The "meat-ing" was held in the same place as last year, namely at the Hall in Cadbury's Estate at Claremont.

Our bottle drive has been completed for a while, but we are still in the process of disposing of our "gifts." A lot of time and effort has gone into this project, and I think our organisers deserve a vote of thanks as well as all those who helped to make it a big success. Our zone was divided into four areas and a couple of days before our collection pamphlets were distributed to the houses concerned. On the following Saturday groups of students faced the task of calling at the places and carting away the empties, although it must be confessed at one house an untouched bottle was received. So far about £30 has been received and there are still a few

more bottles to be disposed of. This sum is to be added to our ever-growing fund for Congress, 1961.

A proposed trip to the hydro-electric scheme in the Central Highlands has been postponed due to lack of transport.

A similar trip was held last year and was such a success that it was decided to go back again.

The University Commemoration Parade will be held on May 13, and preparations are in full swing. Secrets cannot be divulged at this stage, but I can assure you that the students will receive their share of attention.

—Keith S. Brown, L.P.O.

PHARMACEUTICAL RESEARCH IN THE U.S.S.R.

A committee of inquiry consisting of nine members, including five doctors of pharmacy, has been set up in the Soviet Union to carry out an "investigation of new techniques of preparing medicines and methods of analysing them." Under the new seven year plan (1959-1965) the committee will pay particular attention to the possibility of preparing medicinal substances from indigenous raw materials (Apotechnoe Delo, 1958, 5, 3).

Investigations will be continued into the improvement and culture of medicinal plants and into the creation of new and more productive forms (e.g., polyplids). These will include studies of the chemical constituents of plants, the mode of formation of active principles, the relation between various groups of substances within the plant, and methods of collection, drying, preparation and storage. Attention will also be given to problems involved in the tableting of potent substances used in small doses, the preparation of emulsions for intravascular use, the formulation of long-acting preparations (for example, of anti-biotics) and children's medicine, pill and tablet coating, and the substitution of liquid preparations by dried products.

Investigations in pharmaceutical analysis will be largely determined by the problems of analytical control within the pharmacy—of injection solutions, for example. Particular attention will be paid to preparations containing highly potent or poisonous substances. It is considered that present-day pharmaceutical analysis must satisfy three fundamental requirements—it must be accurate, rapid and require the minimum of expenditure, equipment and reagents. Micro- and semi-micro methods are suggested for all control work within the pharmacy. Increased study will be given to methods of analysis of medicinal substances in mixtures, to the keeping qualities of galenicals and other preparations in various parts of the U.S.S.R., and to forensic chemical analysis.

In the organisational and economic sphere a study is to be made of the public's medicine requirements, and of the relation between these requirements and production. During the next few years an investigation will be made of aspects of sanitation and hygiene and the nature of the work of pharmacy operatives, and of economics, planning, and accountancy in various branches of health work, in order to obtain scientifically approved standards in relation to the construction of pharmaceutical establishments and their distribution. Increased study will be given to the progress of medical knowledge, both at home and abroad, and to the possibility of the systematic output of scientific, educational and information bulletins on pharmacy.

In furtherance of these plans the committee of inquiry has recommended to the pharmaceutical establishment and institutes of higher education that they widen the scope of research, speed up progress in the chemical industry, especially the production of synthetic materials and their products, and consider the use of polymers for packaging materials, closures, wrappings, furniture, apparatus, appliances, etc. They are further asked to extend research in the fields of technology of medicines and galenicals, and in the preparation of the 9th edition of the State Pharmacopoeia.

Announcing...



'Triominic'

WANDER

the NEW CONCEPT for
relief of the common cold *orally*

THIS effective treatment for the relief of common cold symptoms will be in constant demand—from now onwards for these reasons:—

'TRIOMINIC' is therapeutically sound: it comprises effective decongestant and anti-allergic drugs.

'TRIOMINIC' taken *by mouth* thrice daily in "timed-release" tablet form provides around-the-clock relief from running nose and postnasal drip.

'TRIOMINIC' has already evoked an exceptional success in the U.S.A. and Europe for the Associate Companies of A. Wander Ltd.

Formula per "timed-release" tablet:

Phenylpropanolamine-HCl	50 mg.
Mepyramine maleate B.P.	25 mg.
Pheniramine maleate	25 mg.

Packs: Dispensing bottles of 12, 50 and 250 tablets.

Also available: 'Triominic' Syrup, for children and those adults who prefer a liquid medication, in bottles of 2 fl. oz.

'TRIOMINIC' will be advertised throughout the common cold "season" in the usual medical journals. In support of this advertising, nation-wide visits by medical representatives, follow-up mailings and generous sampling *have begun*.

TO MEET THE ANTICIPATED DEMANDS, BE SURE TO ORDER YOUR FIRST STOCK NOW!

A WANDER PRODUCT

Sole Australian Distributors
PHARMEDICA PTY. LTD.,
Kingsgrove, N.S.W.

Classified Advertisements

The charge for these Advertisements is 4/- per line, with a minimum of 12/-, payable in advance

LOCK-UP SHOP TO LET, long lease, in excellent shopping centre. No opposition. Freehold if required. Reply to "No. 19559," c/o "A.J.P." Office, 18 Saint Francis St., Melbourne.

CHEMIST WANTED

GEEELONG & DISTRICT HOSPITAL (VIC.)

The above 440 bed hospital requires the services of a Registered Pharmacist. Routine dispensing, sterile preparations and tabletting are undertaken by the pharmacy department.

Salary, £25 per week.

Working conditions are good and a five-day week is worked. Good accommodation is available in the Nurses' Home at a nominal fee. Geelong is 45 miles from Melbourne and is connected with a good rail service.

Further details on application to the Chief Pharmacist.
E. J. R. TAYLOR, Manager and Secretary.

R. V. U. ROTHWELL

STOCK & SHAREBROKER

Member of The Stock Exchange of Melbourne

Please note CHANGE OF ADDRESS to

423 LITTLE COLLINS STREET,

(Ground Floor),

MELBOURNE, C.1.

(Opposite The Stock Exchange)

THE TELEPHONE NUMBER is 67-3525.

NORTH BOX HILL (Vic.). Freehold new lock-up shop, corner position, suits chemist. Built-up area. Only £750 dep. £10 weekly. £4350. UM 6974.

BUSINESS WANTED

Melbourne City or Suburban. Turnover £20,000 to £30,000. Genuine buyer. Replies treated with strictest confidence. Write to "No. 21559," c/o "A.J.P." Office, 18 St. Francis Street, Melbourne.

FOR SALE . . . Large modern Pharmacy in New Guinea. Turnover £18,000 and rising steadily. Fittings, etc., are very modern and in perfect condition. The shop itself is situated in the heart of a rapidly expanding town. Large store room and house are included in the sale price. Terms can be arranged.

For further particulars write Rabaul Pharmacy, P.O. Box 76, RABAU, TNG.

YOUNG PHARMACISTS are invited to register for appointments as executive trainees. The Company expects completion of a course in sales management, accountancy, or production management, and will give facilities to attend lectures.

Five-day week . . . Superannuation scheme . . . Three weeks' annual leave.

Commencing salary according to age and experience. Annual increments. Bonus on completion of course selected. Prospects practically unlimited and depend on the man himself.

Apply by letter, giving full personal details, including experience and qualifications, to

DEPUTY GENERAL MANAGER,
Sigma Company Limited, 589 Collins Street,
Melbourne, C.1.

For Sale — Pharmacy — South Queensland, handy Brisbane. Rich dairying and timber area. Turnover exceeds £16,000. Set-up would suit registered man and wife team. Residence available. Replies to "No. 25559," c/o "A.J.P." Office, 18 St. Francis Street, Melbourne.

COMMONWEALTH OF AUSTRALIA DEPARTMENT OF HEALTH

Pharmacist (Inspection), Grade 1, Melbourne, Victoria.

Salary: £1506-£1686 (female rate £1336-£1516).

Duties: Inspections under the Pharmaceutical Benefits provision of the National Health Act and under the Therapeutic Substances Act.

Qualifications: Registered Pharmacist within the Commonwealth with detailed knowledge of the Act and Regulations governing the practice of pharmacy. Administrative experience desirable.

Applications to: The Commonwealth Director of Health, Commonwealth Centre, corner of Spring and Latrobe Streets, Melbourne, Victoria. By: 13/6/59.

THE PUBLIC SERVICE OF PAPUA AND NEW GUINEA

VACANCY

SUPPLY OFFICER (PHARMACEUTICAL), GRADE I (Six Positions)

£1,256 - 1,526 p.a. (Unmarried)

£1,381 - 1,651 p.a. (Married)

(Rates quoted are actual and include allowances and adjustments. Additional Territorial allowance of £25 p.a. after five years' service and a further £25 after seven years' service is also payable.)

Qualifications: Registered pharmaceutical chemist or other qualifications acceptable Territory Medical Board.

Duties: Supervise receipt, issue and special maintenance medical and surgical supplies at bulk store.

Eligibility: Positions open to males only.

Appointment: Fixed term or permanent appointment, as desired.

Location: Appointees are required to serve anywhere in Territory.

Accommodation: Single quarters available; married accommodation unlikely to be available under 18 months from date of appointment.

Separation Allowance: Payable at discretion of Territory Administration; designed to compensate for added expense of married appointees obliged to maintain family outside Territory.

Leave: Three months after each twenty-one months in the Territory. Additional three months' leave after each six years' service and six months' furlough after twenty years' service.

Further Information: An information handbook on the Territory Public Service is available from Department of Territories, Canberra or Sydney, or from any Commonwealth Public Service Inspector, Commonwealth Employment Office or official country Post Office. Other enquiries to Dept. Territories, Canberra (phone U 0411, Ext. 29A).

Applications: Submit on prescribed form available from offices mentioned under "Further Information."

TO

The Secretary,
Department of Territories,
Canberra, A.C.T.
by July 31, 1959.

Now! Here's even more
Kleenex* tissue business for you...



IN 2/- AND 3/9 SIZES

Kleenex* TISSUES with 3,500,000 men waiting for them

This new Kleenex tissue has **wet strength**. You can put it under a running tap and it won't fall apart. It's soft, but strong — the biggest man-sized sneeze won't blow through. It's so different and there's a real need for it amongst men — we have given "Kleenex-for-Men" a special, quickly recognisable

red and black box.

You already know that you only have to display Kleenex tissues to sell them. Displays of this new tissue for men will bring big, new profits, too. Get in early... give them a real go — the big advertising campaign starts running next month.

BIGGER PROFITS

Increase your profits by ordering "Kleenex-for-Men" combined with cases of Kleenex tissues and Kleenex* toilet tissue (all sizes and colours) for quantity prices...

- On the 4-case line you make 33½% mark up on cost.
- On the 8-case line you make 39% mark up on cost.
- On the 25-case line you make 50% mark up on cost.

KK344

Increase your sales with featured displays... increase your profits with Combined Case orders. For information on displays, contact your Kimberly-Clark salesman.

MARS ROAD, LANE COVE, N.S.W. JB 1223
BOX 4080, G.P.O., MELBOURNE, VIC. MU 6392
BOX 117, P.O., BROADWAY, BRISBANE, Q'LD. 5-1249
BOX 1701N, G.P.O., ADELAIDE, S.A. LF 6716
BOX T1691, G.P.O., PERTH, W.A. W 2275

*Registered Trade Marks.

COLOURS

COLOURS

**Now Kleenex* tissues and Kleenex* toilet tissue
in the biggest colour range ever!**

*Registered Trade Marks.

PINK — AQUA
now in 2/- and
3/9 sizes



Stock and Feature for the Sneezein' Season —the only tissue that pops up one at a time

Boost Sneezein' Season sales higher this winter with Kleenex* tissues... in colours... in TWO sizes... 3/9 and 2/-. Your women customers will be looking for Kleenex tissues in colour... so don't disappoint them — set up your displays now... pile up plenty of Kleenex in Pink and Aqua in 3/9 and 2/- sizes beside the four regular sizes of white.

More advertising for coloured tissues than ever before. Colour! Colour! Colour! is the theme of our advertising. Colour pages in the Australia-wide Women's magazines plus Newspapers, Radio and Television... will urge women to buy Kleenex in colours... to match their kitchens, bathrooms... for their dressing tables and cars.

The safe, health-protecting toilet tissue now in colours

No other toilet tissue on the market can offer your customers such a big range of colours. So why not add to your profit and stock Kleenex* toilet tissue in *Pink*, *Aqua* and *Yellow* as well as white. To make sure they buy in your store... set up your displays now in a spot that's sure to catch their eye.

Established product at a popular price

All Australia knows the name of KLEENEX and its reputation for superior quality. And women know that when they buy Kleenex toilet tissue, they buy a *safe, health-protecting tissue*.

Tremendous Advertising

This year Kleenex toilet tissue will carry more advertising than ever before. *Colour, colour, colour*... again our main theme. Colour pages will appear in the Australia-wide Women's magazines. These will be followed by ads in the press stressing the all-important health story.



Combined case orders give you opportunity for bigger profits!

You can increase your profits by ordering combined cases of Kleenex tissues and Kleenex toilet tissue (all sizes and colours) for quantity prices...

On the 4-case line you make 33½% mark up on cost

On the 8-case line you make 39% mark up on cost

On the 25-case line you make 50% mark up on cost

Increase your sales with displays... increase profits with big combined case orders. For help or information on displays, see your Kimberly-Clark salesman.

Mars Rd., Lane Cove, N.S.W. JB1223
Box 4080, G.P.O., Melbourne, Vic. MU 6392
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Box T1691, G.P.O., Perth, W.A. W 2275

*Registered Trade Marks.

KK340.

Introducing new *Kotex* FEMININE NAPKINS with Wondersoft covering



New feminine-styled box and paper wrap

Many of your women customers are not satisfied with the sanitary protection they now use.

They want . . .

- greater softness
- greater comfort, more absorbency
- new freedom from chafing.

To answer their need new KOTEX feminine napkins with WONDERSOFT covering were developed.

NEW KOTEX is designed to . . .

- fit better
- protect better
- feel softer.

*Registered Trade Mark.

It's NEW...and it's being launched with the biggest advertising campaign ever!

This is the biggest campaign ever for a feminine napkin. For the first time a feminine napkin manufacturer will have a colour double-spread (two full pages) in The Australian

Women's Weekly to announce a new improved product. It will be followed by colour pages in The Australian Women's Weekly and Woman's Day and city newspaper full pages.

Women will be looking for new Kotex...

Display it now — to make sure they buy at your pharmacy.

Use our colourful display material for your windows, counters, serve-yourself stands . . . designed for eye-catching feminine appeal. For help or information on displays contact your Kimberly-Clark salesman.

Mars Road, Lane Cove, N.S.W. JB 1223.
Box 4080, G.P.O., Melbourne, Vic. MU 6392.
Box 117, P.O., Broadway, Brisbane, Q'ld. 5-1249.
Box 1701N, G.P.O., Adelaide, S.A. LF 6716.
Box T1691, G.P.O., Perth, W.A. W 2275.



*Where else can you make
up to 2d per packet more profit?*

Kotex feminine napkins give you the opportunity to make more profit than any other brand . . . from 1½d. to 2d.

more per packet. If you combine Kotex feminine napkins with Kotex* belts to qualify for quantity prices you gain . . .

- ★ on a combined 4-case buy — up to 1½d. more profit per pack than any other brand.
- ★ on an 8-case buy — up to 2d. more per pack than any other brand.
- ★ Kotex with gauze covering will still be available.

Stock and feature Kotex belts — the biggest, most profitable belt range on the market.

The Women's Section

Correspondent: Miss A. K. Anderson

To all delegates who are going to Adelaide at the end of May we extend good wishes for a successful and happy Conference.

WOMEN PHARMACEUTICAL CHEMISTS' ASSOCIATION OF S.A.

At the meeting held in the Lady Symon Lounge on May 12, last-minute arrangements were discussed for the entertainment of visiting women pharmaceutical chemists during the P.A.A. Conference being held in Adelaide at the end of May. Remits for the Federation meeting were also discussed, and the Association's two delegates were instructed how to vote.

At the close of our business meeting the President, Miss Zeta Walsh, introduced our three speakers for the evening. They were three of our members, Misses Pat Munyard, Nancy Cooper and Joan Nicholson, who had recently returned from overseas and who were to speak to us on their "Pharmaceutical Experiences Abroad."

Miss Joan Nicholson told us first of ten weeks she spent relieving in the Shetland Islands. The Mainland, the largest island in the group, has a population of over ten thousand people and has three pharmacies in the capital city of Lerwick, and two other pharmacies in other parts of the island. Miss Nicholson spent two weeks at each of the five shops, and found pharmacy there much more interesting than work in England. There were an average of 50 to 80 extemporaneous scripts per day per shop, plus about 20 O.P. scripts and quite a lot of first aid needed, often for cats or dogs. One of the worst problems were salt water boils, which needed dressing. In addition to this ordinary work, the three main shops would take it in turn to do the dispensing for the 60-70 bed hospital, each doing it for three months at a time. In addition, they also took turns in doing the dispensing for the surrounding countryside and neighbouring islands. No sterile work was done on the island. Supplies were sent from Aberdeen twice a week by boat, but any urgent requirements were flown in by plane, although in winter planes often could not land due to the intense fog. Due to the high cost of cartage by boat, most tinctures and stock solutions were made up on the island. Obviously it would be impossible to train apprentices there, and most shops had one qualified and two very efficient unqualified assistants. One of the shops Miss Nicholson worked in could claim the title of the most northerly pharmacy in Great Britain.

Miss Pat Munyard described her five and a half months spent in hospital work. Usually it is only possible to stay for eight weeks relieving in a hospital group, but she was fortunate to be able to stay for the longer time in one hospital. Hospital pay for permanent employees is very low, but is compensated by superannuation and pension schemes. Hospital work was very similar to that in Australia, except for the

slot machine outside the department, where people obtained script stamps which must be attached to each script (1/- per script). The hospital hours were very good—9 till 5 five days a week, plus half a day on Saturday, but with every third Saturday completely free.

Miss Nancy Cooper painted a rather depressing picture of retail pharmacy. The hours were very long: 9 till 6 six days a week, but with Wednesday and Thursday afternoons off. Many of the pharmacies were not owned nor even managed by a pharmacist; often they just employed someone qualified to do the dispensing.

There was plenty of work to be had in the summer, often at a higher salary, but in the winter they preferred you to stay for a longer period. Under the National Health Service, dispensing had largely become a matter of filling bottles from duplex stock bottles and counting out tablets. Everything in the dispensary seemed to be bought; nothing was made on the spot; in fact, they just did not have the ingredients to make stock solutions, etc. Dispensing fees were very low compared with ours, and the British National Formulary was practically the only one used.

Miss Elaine Lokan proposed a vote of thanks to our three speakers. She said that most of us had plans or at least dreams of visiting Great Britain at some time, and it was most helpful to us to hear of the experiences of other pharmacists. The meeting then adjourned to the Coffee Lounge for supper.

THE WOMEN PHARMACEUTICAL CHEMISTS' ASSOCIATION OF VICTORIA

The Association's annual meeting was held in the College of Pharmacy on May 7. The President, Miss Keogh, welcomed members, extending a special greeting to Miss Rymer (Queensland) and Mrs. Clarke (Great Britain).

After the minutes of the previous general meeting were read by the Hon. Secretary, Miss Keogh reported on the year's activities of the Association, Miss Maskell read the Secretary's report, and Miss MacGillivray presented a most satisfactory balance-sheet.

Remits for the Conference were discussed, and the voting delegates, Miss Keogh and Miss Anderson, instructed by the meeting.

Election of Committee for 1959-60 resulted in following:—

President: Miss A. Anderson.

Vice-Presidents: Miss K. Keogh and Miss G. Donaldson.

Hon. Secretary: Miss I. Maskell.

Assistant Secretary: Miss N. Cornu.

Treasurer: Miss R. MacGillivray.

Committee: Mrs. Harkins, Mrs. Paul, Miss J. Caird, Miss J. Riley, Miss J. Mundy and Miss N. Ganderton.

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Commonwealth and State News

WESTERN AUSTRALIA

PERSONAL and GENERAL

State News

Members desiring publication of personal items of interest are invited to write or telephone details to the Journal Correspondent in W.A., Mr. F. W. Avenell ('phone BA 4082).

Mr. J. Benn has opened a pharmacy at Beaufort st., Inglewood.

Mr. P. J. Johnson has closed his Victoria Park pharmacy and opened a new pharmacy at Midland Junction.

Mr. and Mrs. C. Rutledge, of North Perth, are spending a six months holiday in England. Mr. B. F. McMahon is in charge of the pharmacy.

Mr. N. Moore, of Victoria Park, spent a few weeks' holiday in Tasmania. Mr. V. J. Stoyanoff acted as locum.

The widespread virus epidemic prevailing in W.A. for the past couple of months has kept most pharmacies extremely busy, some reporting record sales and prescriptions turnover. Several pharmacists have themselves been victims of the disease.

Chemists on holidays this month included Mr. G. D. T. Allen of Cottesloe (Mr. P. B. Keogh relieving); Mr. G. Sherry of Bunbury (Miss A. Symes relieving); Mr. R. Norman of Albany (Mr. D. Edwards relieving); Mr. N. D. Lee of Boulder (Mr. I. Rear relieving); Mr. A. W. W. Rock of Bassendean (Mrs. G. Lucraft relieving); Mr. E. L. Tyler of Perth (Miss J. E. Shepherd relieving); Mr. A. J. McMahon of Victoria (Mr. W. E. Wilson relieving); Mr. H. N. Armstrong of Perth (Mrs. Letch relieving); Mr. W. L. Fauckner of Claremont (Mr. P. B. Keogh relieving); Mr. C. M. Saunders of Victoria Park (Mr. R. Shearer relieving); Mr. J. Perlman of Dalkeith (Mrs. P. Lewis relieving) and Mr. A. Cohen of Maylands (Mr. S. T. Hughes relieving).

WEDDING

Mr. Leon Krasenstein and Marlene Davey were married at the Temple David, Mt. Lawley, on May 19. They are spending their honeymoon in the Eastern States. Mr. A. D. Wager is in charge of the Grand Pharmacy during Mr. Krasenstein's absence.

PHARMACEUTICAL SOCIETY OF WESTERN AUSTRALIA

GRADUATION NIGHT: APRIL 29

The Tenth Annual Graduation Ceremony of the Pharmaceutical Society of W.A. was held at the Assembly Hall, Perth, on April 29.

In opening the proceedings the President, Mr. G. H. Dallimore, welcomed those present, making special mention of Dr. F. Bryan Mathieson, Commonwealth Director of Health (W.A.), Mr. W. G. Hayman, Superintendent of Technical Education, Mr. A. P. Ffarrington, Principal of Perth Technical College.

The Graduands were presented to the President by Dr. E. M. Watson, Lecturer in Charge, Chemistry Dept. at Perth Technical College.

The President presented Diplomas, Registration Certificates and Fourth Year Examination Certificates to the following: Kerry Doyle Bateman, Hedley Maxwell

Bond, Claude Joseph Byron, Brian Robert Carlisle (in absentia), John Angelo Cattalini, Ian Wesley Crawford, Kenneth Richard Davies (in absentia), Ronald Charles Dymock, Josephine Monica Forde, David Colin Heppell (in absentia), Ernest James Hogan, Kenneth Holborne Hurst (in absentia), William Kevin Hynes (in absentia), Phillip Brian Keogh, Richard Francis MacDonnell, Terence Cornelius McManus, Basil Michael Moursellas, Peter Leslie Oliver, Hymen Rosenberg (in absentia), Hymie Schwartz (in absentia), Harry Segal, Max Shub (in absentia), Victor John Stoyanoff, Anne Symes.

In addition to diplomas and certificates the Webster Memorial Gold Medal was presented to Malcolm P. Sparrow and the Pharmaceutics-Materia Medica Prize to Jennifer E. Shepherd and Geoffrey C. Miller.

Third Year Certificates were presented to: Samuel Benn (in absentia), Beverley Margaret Black, John Howard Blackburn, Ralph Lewis Brockman, Malcolm Douglas Cann, Ross Alan Cheffins, Peter Gilbert Cook, Ian Keith Davie, Robert James Devereux, Murray George Edinger, Roy Desmond Edinger, Lola May Giles, Kim James Hawkins, Eric Denzil Hogben, Barry Edward Hopkins, Marian Mary Hunter, John Percival Inglis, Allan Robert George Jackson, Edward Peter Janney, Kerry George Manolas, George Bohdan Mencinsky, David William Moyes, Enid Linley Nicholls, Horace Augustus Panizza, Trevor Westlake Rock, Thomas Glen Stiffold, Kenneth Francis Vale, John Bernard Walker.

Second Year Certificates: Rodney John Adams was presented with the Pharmaceutical Council Bursary and Second Year Certificate. Second year certificates were also presented to: Richard Frank Amey, John Allan Bateman, Graeme Harvey Johnston Beckwith, Kevin Alphonsus Bogue, Bryan John Elliott, Margaret Kay Finlayson, Sincero Antonio Garbellini, Gary Basil Hastwell, Kevin Edward Walter Keevil, Geoffrey Ross Kelly, William Ernest Leunig, Brian Michael Lynch, Colin Bruce McArthur, Stuart McIntyre McGregor, Geoffrey Ogden, Bonnie Maureen Osborne, Kevin Clive Power, Roger Harold Shem, Eunice Mary Taylor, Brian Ferrall Twaddle, Anthony Ross Windsor.

First Year Certificates were presented to: Lynette Valmai Acland, Laurence John Bonadeo, Graeme Lisle Braddock (in absentia), Garry Albert Cateer, Kent Frederick Carter, Roger Frank Downing, Peter Eliopoulos (in absentia), Ronald Jack Ellams, Iain Emslie (in absentia), Frank Ewell (in absentia), Keith Raymond Hamilton, Michael John Hawkins (in absentia), William Leeder Hicks (in absentia), Keith Hywood, David Philip James, Rodney William Keals, Brian Morris Kendall, Robert Charles Kernick (in absentia), William Arnold King (in absentia), John Dennis Kirk (in absentia), Kevin John Lambe, Freda Levy, Winston Franklyn Marsh, Robert William Maxwell, Geoffrey Eric Oakley, Brian Charles Patman (in absentia), Raema Gwenyth Phillips, Anthony Darrell Proctor (in absentia), John Melbourne Rees, Brian Kevin Rowe, Rodney John Sclanders, John Robert Neville Schurmann, Alan Keith Shepherd, Graham Thomas Swan, Dorothy Lorraine Tapper, Eva Ulmanis, Charles Donald Urquhart, Kingsley Flett Wake (in absentia), Frank Karl Walser, Ross Williams, Kathleen Mary Yates, Jack Zuffi (in absentia).

Special Prizes and Bursaries

The President then called on Mr. G. D. T. Allan, President Pharmaceutical Service Guild (W.A. Branch), to present the Mayhew Dispensing Prize to Geoffrey Charles Miller.

Before making the presentation Mr. Allan congratulated

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WESTERN AUSTRALIA—Continued

lated Mr. Dallimore on his elevation to the Presidency of the Pharmaceutical Council.

On behalf of the Women Pharmacists' Association, Mrs. E. E. Adlard presented the Mrs. H. M. Lyons Prize for 3rd Year Chemistry to Beverley M. Black.

The Kodak Prize was presented to Mr. Sparrow by Mr. E. Parlato.

The Rumbles Bursaries were presented by Mr. G. D. T. Allan to Beverley M. Black, William F. Leuning and John R. N. Schurmann.

The President handed to Malcolm P. Sparrow and Geoffrey C. Miller a handsome pin as a memento of the Parke Davis Prizes which they had already enjoyed in the form of a trip to Sydney at the firm's expense.

Mr. R. V. Hill represented F. H. Faulding & Co. Ltd. in the presentation of Faulding Bursaries to Ross Williams, Colin A. Marshall and Colin R. W. Scott.

In presenting the D.H.A. Prizes to Malcolm D. Cann and Jennifer E. Shepherd, Mr. G. Hassell appealed for more competition by students in submitting essays for the D.H.A. Prize.

On behalf of his company Mr. M. J. Watson presented the Boots Prize to Sister Josephine Forde.

In congratulating the successful students the President said: During one's lifetime there are many important days—the day we cut our first tooth, the day a youth wears his first long pants (and judging by present-day fashions, this could also apply to the female sex)—our first day as an apprentice and so on, but one day that must stand out is that of our Graduation—the day we receive our diploma—tangible evidence of the hard years of study and training we have just completed.

To those students who have recently qualified, I offer my very sincere congratulations and wish them every success in the future.

Before speaking of the future of Pharmacy, I would like to pay tribute to a chemist who has recently passed away—the late Tom Allan. Mr. Allan, a past president of the Council, lecturer at our college, an untiring worker for our cause, did much to build Pharmacy to the high position it holds in the community at the present time.

And what of the future of Pharmacy? In this changing world it is difficult to predict with any degree of accuracy what is going to happen. Who would have thought that the modern housewife would change from the corner grocer, who served her personally, gave her credit without interest, and delivered her goods, to the impersonal self-service or supermarket, where you wait on yourself and carry your own goods home in a string bag.

However, I feel that Pharmacy has a very bright future and that the service the chemist renders to the community will always remain a necessity.

And speaking of service, I would like to point out to our recently qualified chemists that it is in this direction that they can help to raise the status of Pharmacy.

By service, I do not mean service in your business only, but to take an active part in the life of the community.

You should be active members of your associations, join the Road Board or Council, become a member of the P. & C. Association and stand for Parliament. One of the greatest honours paid to Pharmacy recently was the granting of the O.B.E. to the Federal President of the Guild—Mr. Eric Scott—for his outstanding pharmaceutical work and the service he rendered to his fellow man.

I know that many of you consider that it is only through raising the standard of education that we can raise our status. Whilst education does play an important part, it is secondary to the service we render to our fellow man.

By successfully doing something for the betterment of the community, you will feel that sense of achievement that money or education can never produce and you will play an important part in helping to build a better world to live in.

Mr. Dallimore then called on Dr. F. Bryan Mathieson, Commonwealth Director of Health, Western Australia, to deliver his address.

Dr. F. Bryan Mathieson's Address

Mr. Chairman, Ladies and Gentlemen,

I should like to express my appreciation to the Chairman and members of the Pharmaceutical Council of Western Australia for the honour of being asked to address you this evening—an honour of which I am fully conscious. May I also take this opportunity of congratulating you young men and women for having satisfied your examiners and for now being entitled to follow the very important and responsible profession of pharmacy.

The treatment of the sick in all its phases is a very noble calling, whether it be by doctor, pharmacist, nurse, technician or others. Of paramount importance in this team work is the supply of accurately dispensed therapeutic agents, for without them the doctor's value to the patient is extremely limited, being restricted to diagnostic and surgical skill. Ambrose Pare, a famous French army surgeon of the sixteenth century, once remarked—"I dressed him and God cured him." Pare was probably the greatest surgeon of his day and was the author of a treatise on gun-shot wounds (1545). Even in those days, he recognised the limitations of a doctor without the ancillary services in dealing with the sick and the injured.

The treatment of the sick and suffering is a very satisfying and rewarding occupation, but it carries with it heavy responsibilities. The pharmacist, more so than in any other branch of this noble art, shares with the doctor this heavy responsibility. Drugs and other therapeutic agents are most valuable to us when used correctly, but are a considerable source of danger when an attempt is made to dispense or use them by the untrained or the uninformed. In every prescription written by a doctor and dispensed by a pharmacist, human life, literally, is at stake. A miscalculated dosage or the dispensing of a wrong drug could mean the patient's life. It is this fact which calls for the utmost care and precision in dispensing drugs. Therefore, I exhort every one of you to exercise the greatest care and caution to check and cross check every drug or prescription dispensed. In saying this I am merely reiterating what your teachers have been emphasising right from the very first day of your training in pharmacy. The intelligent and watchful pharmacist also is in a key position between the patient and doctor. If any prescribed dosage appears excessive, he is in a position to communicate with the doctor and to confirm the recommended treatment.

I have thought that a few words on the pharmacist and his relation to the National Health Service may be of some interest to you, not to say of some benefit. This is the subject on which I am best qualified to speak and in so doing I hope that I shall not bore you.

A short history of the Pharmaceutical Benefits Scheme should be of interest. The Commonwealth passed the Pharmaceutical Benefits Act in 1944 authorising the provision of pharmaceutical benefits, free of charge, to residents of Australia. The Act restricted benefits to medicines, materials and appliances listed in the Commonwealth Pharmaceutical Formulary. Benefits under the Act could be obtained only from approved chemists upon the presentation of a prescription signed by a registered medical practitioner and written on a form supplied by the Commonwealth. The Commonwealth's Pharmaceutical Benefits Scheme was opposed by the British Medical Association, and as a result of a writ issued by its Victorian Branch in October 1945, the High Court declared the Pharmaceutical Benefits

WESTERN AUSTRALIA—Continued

Act 1944-45 to be ultra vires the Commonwealth Constitution, in that the Commonwealth could not expend money on the provision of medicine.

Following an amendment to the Constitution in 1946, a new Act was passed in 1947 along the lines of the previous legislation. In 1949, two amendments were made to this Act attempting to compel medical practitioners to use the Commonwealth prescription form. As a result of a writ issued by the Federal Council of the B.M.A., the High Court held that Section 7A of the Pharmaceutical Benefits Act 1947-49 was invalid in that any attempt to compel medical practitioners to use the Commonwealth prescription forms was civil conscription. Less than 200 doctors in the whole of Australia prescribed under the Act.

With the change of Government at the end of 1949 the Commonwealth's policy on Pharmaceutical Benefits was radically altered. Although the Pharmaceutical Benefits Act 1947-49 remained in operation, new regulations came into force on September 4, 1950, whereby a restricted list of life-saving and disease-preventing drugs was available free of charge to the whole community. This list of drugs was drawn up by an expert committee appointed by the Minister and consisted of medical practitioners, pharmaceutical chemists and a pharmacologist. This list is revised from time to time by the committee, and additions may only be made to the list upon recommendation to the Minister by the committee. Under the new regulations, prescriptions could be written on other than the Commonwealth form. The new Pharmaceutical Benefits Scheme received the full co-operation of the B.M.A., and this co-operation has been maintained up to the present time.

In June 1951, the Commonwealth passed the National Health (Medicines for Pensioners) Regulations authorising the provision of medicines for pensioners. Generally speaking the benefits provided free of charge under this scheme included all the drugs and medicinal preparations listed in the British Pharmacopoeia. These benefits were made available to all persons in receipt of Australian age, invalid, widow or service pensions, or a Tuberculosis allowance. Dependents of these pensioners were also entitled to benefits. Benefits were authorised on and from July 2, 1951. The legislative machinery for both general and pensioner Pharmaceutical Benefits was consolidated in the National Health Act 1953.

Thus it will be seen that, with the exception of the Pensioner Pharmaceutical Benefits Scheme, pharmaceutical benefits in this country under the National Health Act are restricted to life-saving and disease-preventing drugs. In this regard our scheme differs materially from that in operation in the United Kingdom and New Zealand.

Since the inception of the National Health Service, we have come a long way. Bearing in mind that no National Health Service is likely to have all the answers and be universally acceptable, it is my opinion that for the Australian temperament and outlook, our National Health Service is the one which seems to be the most acceptable all round. I am sure that a full salaried service such as exists in the U.K. with its inevitable regimentation of the public and the medical profession would be totally unacceptable.

The Australian National Health Service is one of my hobby horses, but I must confine my remarks to the Pharmaceutical Benefits side of it. Generally speaking, the Pharmaceutical Benefits Scheme is working most satisfactorily. We have an excellent working arrangement with both doctors and chemists. In this regard I should like to emphasise the importance of the Department having personal contact with the doctor and chemist, and further the importance of having technical personnel to make that contact. I have stressed so often

to the heads of Commonwealth Departments how essential it is for this contact to be maintained at professional level. A doctor is the only person who is able to speak another doctor's language and to understand his professional problems. Therefore, practically all personal contact with doctors in this State is maintained by myself or by one of my departmental medical colleagues. By the same token, the pharmacist is the only person who fully understands the problems of another pharmacist, and so I leave all personal contact in this regard to my very good friends and colleagues in the Department — the Chief Pharmacist, Mr. A. C. McWhinney, and the Inspection Pharmacist, Mr. A. Stocker.

As another example of the attitude of the Commonwealth Department of Health in the maintenance of a strict professional hierarchy, I should like to mention the Committees of Inquiry which have been appointed by the Minister to deal with infringements of the National Health Scheme. The Medical Services Committee of Inquiry is constituted entirely of doctors. The Pharmaceutical Services Committee of Inquiry has four extra-departmental pharmacists appointed by the Minister, the Chief Pharmacist and myself. How different is the constitution of these committees to those of the U.K.! If a doctor's activities are investigated in the U.K. at least three-quarters of the personnel of such committees are lay persons.

We are all rather jealous of our professional status. Unfortunately, it is a world wide tendency in all administrative fields to relegate the professional man to a position of technical adviser, a position in which his executive authority gradually becomes less and less until ultimately it becomes non-existent. Throughout the Commonwealth and State Public Services of this country and the Civil Service of the United Kingdom, it is the view of the policy makers that a professional man is a poor administrator and, therefore, the activities of a professional Department must be piloted by and, indeed guided by, an experienced lay administrator. Perhaps we professional men are not entirely blameless for the existence of this state of affairs. In my own experience so many of my professional colleagues have resented having to do administrative duties. "That is clerk's work," they say. I have to remind them that if they wish to retain the reins of power they must live up to their responsibilities. The British Ministry of Health is completely under lay control. Most of the State Departments of Health in Australia have a lay officer as the chief executive officer. Lay control begins quite insidiously and before the professional man knows where he is he is ousted. In this country the Commonwealth Department of Health is one of the last bastions of professional control of a Department. The Director-General is a medical officer and he is the Permanent Head and Chief Executive Officer. In each State he has a Medical Director who is directly responsible to him for all activities in that State. Our legislation is specifically worded so that the Department will be protected from lay control. Section 5 of the National Health Act 1953-57 states "A person is not eligible to be appointed as Director-General unless he is a legally qualified medical practitioner of not less than ten years' standing." Therefore, as professional colleagues and in whatever sphere you may find yourselves, I exhort each and every one of you to guard very jealously your professional status and all the responsibilities it carries.

A final point which I wish to mention this evening is that of esprit de corps between the chemist, doctor and the Department. Generally speaking, this is a very happy arrangement. We are extremely grateful to and appreciative of the practising pharmacists of this State for the wholehearted co-operation they have given to the Department. In like manner we are very grateful to the practising doctors for their co-operation in helping to run the National Health Service, but a further liaison is vital—that is the one between the chemist and the practising doctor. The respect that these two

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WESTERN AUSTRALIA—Continued

bodies have, one for the other, and the mutual co-operation which is exercised in the running of the two professions have always been a source of admiration, if not a source of wonderment, to me. Doctors are inclined to be very independent persons. Pharmacists in the running of their business are, and have every right to be, independent persons. In view of these circumstances one would expect not infrequent clashes of temperament. To the great credit of both professions I can assure you that these clashes are extremely exceptional and, in all fairness, the clashes on which I have been compelled to adjudicate have been, principally, the fault of the doctor. Therefore, whilst congratulating the two professions for the very excellent and efficient working arrangement that exists between them, I should like to make a special plea to you young men and women who are about to commence your careers for a maintenance of this close relationship and this spirit of mutual co-operation between doctor and chemist.

In conclusion, may I reiterate my congratulations to you all and to remind you that the resources of the Commonwealth Department of Health are at your disposal should you require any guidance in any phase of the National Health Service. Remember always your heavy responsibilities in having human life on your hands. Follow in toto the ethical principles laid down by your Council. In so doing you will find not only success but happiness and contentment, and it is on that note that I conclude my short address to you.

Mr. A. C. McWhinney in proposing a vote of thanks to the guest speaker referred to the great importance of the National Health Services in the community. He was supported by the students' representative, Mr. M. P. Sparrow, who included in his thanks the staff of

the Perth Technical College, Dr. E. M. Watson, Mr. G. J. Tucker, Mr. E. J. Nicholas, also the Registrar, Mr. F. W. Avenell and Mrs. Sinclair.

The playing of the National Anthem by first year student Miss P. J. Owen brought the proceedings to a close.

THE GUILD

S.B.C. Meeting

The State Branch Committee of the Western Australian Branch of the Guild met at Guild House, 61 Adelaide Terrace, Perth, on May 12, at 7.30 p.m.

Present.—Messrs. G. D. Allan (Chair), R. W. Dalby, S. J. Wilson, W. G. Lewis, G. H. Dallimore, J. G. Skeahan, R. I. Cohen, H. J. Stone, M. H. Arnold, R. D. Edinger.

P.A.T.A.—The Secretary reported that he had written to the P.A.T.A. suggesting that the P.A.T.A. of New South Wales be contacted concerning the matter of shareholders' discounts given to customers, of P.A.T.A. lines, by certain departmental stores.

Plastic Containers.—It was recommended that Federal Office be informed that the State Branch Committee was not in favour of the plastic containers for the following reasons—

1. Difficulty of affixing labels.
2. Capacity of containers not true.
3. Caps too easily removed, leading to danger if young children should handle the filled containers.

It was considered that chemists generally preferred a glass container with a screw cap.

Financial.—The Treasurer's Report was received and accounts passed for payment. Only two members were unfinancial and it was recommended that both be interviewed.

New Members Elected.—Rose Myrtle Millen, Bentley; Jack Benn, Inglewood.

Federal Delegate's Report.—Mr. Dallimore reported that Mr. Scott had now returned from overseas. A meeting of the Federal Executive would be held in Adelaide during the P.A.A. Conference.

Pricing Officer's Report.—Mr. Lewis reported that the costs of the retail pricing service were keeping within the estimate.

The Prosana Laboratories requested that their products be listed in our retail price list, but as these lines are practically unknown in W.A., it was recommended that such products be not included.

Trade and Commerce.—Mr. Arnold reported on the meeting of the Trade and Commerce Committee on May 4.

The sales figures for Dexsal in the recent drive showed that W.A. chemists gained the greatest percentage increase in the Commonwealth. Such figures are conclusive proof of the value of our publicity campaign.

A letter was received from Burroughs Wellcome & Co. (Aust.) Ltd., offering to arrange a "Merchandising Evening" in Perth. This was agreed to and suitable arrangements would be made for the evening to be held later in the year.

The remits for the Federal Trade and Commerce conference were presented and will be discussed with the complete agenda at the next meeting of the State Branch Committee.

N.A.P.S.A. Survey.—The report on the survey made by the N.A.P.S.A. was read. It was felt that the relations between the apprentice and the master in Western Australia were on a satisfactory footing.

June Meeting of S.B.C.—Owing to the P.A.A. conference being held in Adelaide and the absence of the State President and Secretary, it was decided that the next meeting be held on June 23.

Adelaide Conference of P.A.A.—The Agenda for the P.A.A. Conference was fully discussed.

The meeting closed at 10.45 p.m.

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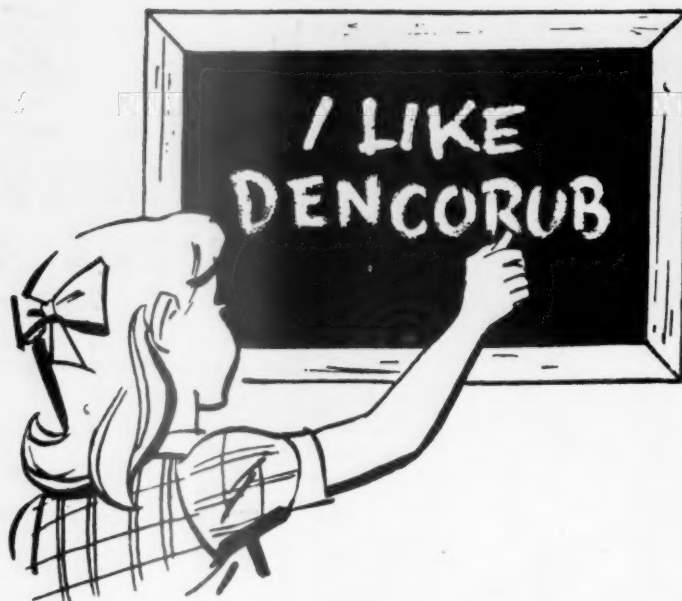
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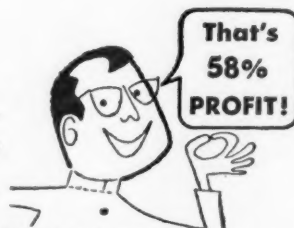
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* (REG. TM)

DT27A/9

TASMANIA

PERSONAL and GENERAL

State News

Members desiring publication of personal items of interest are invited to write or telephone details to the Journal Correspondent in Tasmania, Miss M. L. Williams, 276 Argyle St., North Hobart ('phone B 1010).

Our very best wishes to **Mr. Tony Copeland**, who is to be married about mid-June.

Mr. Ted Shields and his wife are holidaying at Ulverstone.

Among others enjoying holidays are **Mr. Tony Gould** and **Mr. Colin Robinson**.

Mrs. Hawkes has recently returned from a trip to Sydney, where she attended the wedding of her daughter.

Mr. and Mrs. Lin Palfreyman will be going to Adelaide to attend the Pharmaceutical Association Conference.

Engagement.—Congratulations and very best wishes to **Miss Chris Meyer** on her engagement to **Mr. Kurt Cerner**.

Our sincere sympathy to **Mr. and Mrs. Emile Ford** on the sudden death of their son.

PHARMACY BOARD

Monthly Meeting

The Pharmacy Board of Tasmania met at 85 Elizabeth street, Hobart, on May 3, at 8 p.m.

Present.—**Mr. T. A. Stephens** (Chairman), **Miss M. L. Williams**, **Messrs. E. N. Lee**, **A. K. Smith**, **I. B. McLeod**, **B. L. Ralph** and Registrar.

Apprentices.—**Surendra Singh**—Further to the minutes of January 14, the Registrar advised that **Mr. Singh** had applied for exemption in the subject of matriculation physics. The Registrar stated that **Dr. Burgin**, head of the Department of Pharmacy, had fully investigated **Mr. Singh's** application, and on his recommendation it was resolved that **Mr. Singh** should be required to do the three matriculation subjects, no exemption being granted in physics.

Finance.—The statement was presented, and accounts totalling £132/0/9 were passed for payment.

Pharmacy Regulations Amendments (No. 2) 1959.—A draft amendment to the Pharmacy Regulations was received from the Parliamentary Draftsman and approved by the Board.

Pharmacy Act.—Reciprocity, New South Wales.—A letter was received from **Mr. P. E. Cosgrave**, Registrar of the Pharmacy Board of New South Wales, asking whether the Board would extend reciprocity to all registered pharmacists who may have become registered in some way other than by apprenticeship and a qualifying examination.

It was resolved that the Pharmacy Board of New South Wales be notified that the Tasmanian Board is quite agreeable to extend reciprocity to include people

registered by the New South Wales Pharmacy Board, who have not necessarily gained registration on the basis of apprenticeship and a qualifying examination.

New Poisons Act.—**Mr. Lee** brought to the attention of the meeting the urgency for a new Poisons Act.

It was then resolved that the Board set up a committee which will give the rearranging of the Poisons Act immediate attention, and that the co-operation of the legal and medical bodies be sought.

This matter was put forward to the next meeting. **Mr. Stephens** asked members of the Board to give in the interim quiet study of the Poisons Act to see what is needed.

Poisons Act

Paraphenylenediamine.—A query was received by the Board asking who may sell preparations containing the above substances and similar irritant hair dyes.

The Registrar was directed to advise, referring to Section 19 the 3rd Schedule, and Poisons Regulation 4.

Oestrogen, Progesterons and Androgens—Regulation 9.—A letter was received from the Director of Public Health, advising the Board that at the 46th session of the National Health Medical Research Council the following resolution was passed:—

"That Oestrogens, Progesterons and Androgens, or their preparations, should be sold only on prescription and only be repeated on prescription."

The Registrar was then instructed to write to the Secretary of the B.M.A., stating that at present these substances were available without prescription, and that the Board was in the process of considering their control, and that before taking any action would appreciate their opinion, and a request that the Board may from time to time ask for the co-operation and opinions of the B.M.A. in decisions of this nature.

Labelling Anti-Acne Cream.—Correspondence from the Yardley of London (Aus.) Pty. Ltd. was received through the Director of Public Health concerning the labelling of an intended skin cream.—The Registrar was directed to advise that there were no regulations under the Board's jurisdiction to control the labelling and naming of this product.

Anti-Smoking Mixture.—Correspondence was received from **Mr. J. W. Millett**, of Winchelsea, Victoria, through the Director of Public Health, regarding the intended marketing of an anti-smoking mixture.—The Registrar was directed to write to **Mr. Millett** and inquire as to what is the intended final form of the product, the intended directions, and copies of label and container to be used.

Pharmaceutical Liaison Committee.—**Mr. Lee** accepted appointment to member of the Liaison Committee.

Sale of Nasal Sprays Containing Antihistamines.—The Board resolved that no opinion be obtained on Regulation 9 (c), as the Board would reconsider the regulation when considering a new Poisons Act.

Proprietary Prescriptions Guide.—The meeting resolved that a circular be sent to chemists dealing with this publication and the application of Regulations in Tasmania.

Methyl Pentynol (Oblivon).—The meeting resolved that the suggested control of this drug be noted for the projected forthcoming amendments to the Poisons Act.

TASMANIA—Continued

Term of Apprenticeship.—The meeting resolved that the Board ask for a fairly early meeting of the Pharmaceutical Liaison Committee, together with the representatives of the Wages Board who are associated with pharmacy (employer and employee representatives), together with three representatives from the Students' Council to discuss this matter.

Medico-Pharmaceutical Liaison Committee.—The meeting resolved that Mr. Lee be appointed Board member to meet the B.M.A.

Writing of Prescriptions.—The meeting resolved that the preamble to Regulation 9 be reworded along the lines of the National Health Act, this to be considered when the Poisons Act is amended.

Cost of Medicines.—That this should be answered from Board and considered in move that Board is considering (co-operation of the B.M.A.), with the introduction of a new Poisons Act.

Examiners, 1959.—Dr. I. R. Bick advised that he had been granted a year's study leave, commencing May, 1959, and therefore he will be unable to act as Examiner in Pharmaceutical Chemistry for the Pharmacy Board for 1959.

The meeting closed at 10 p.m.

PHARMACEUTICAL SOCIETY

General Meeting

A general meeting of members of the Pharmaceutical Society of Tasmania was held at 93 Davey Street, Hobart, on April 16, at 8 p.m.

Present.—Mr. L. J. McLeod (Chairman) and 27 members.

Post-graduate Course.—The President reported that the Society hoped to arrange a series of post-graduate lectures by pharmacists who have studied overseas, and informed the meeting that arrangements had been made for Dr. Polya to lecture on June 16 and 17 on the Chemistry of the Steroids.

Guest Speaker.—Dr. Bruce MacDonald addressed the meeting on "The Cough and the Chemist." His main points were—

1. Explanation of mechanics and control of respiration.
2. Purpose of respiratory system.
3. Causes of cough—a physiological defence.
4. Treatment of chronic conditions using expectorants, bronchodilators, and linctuses in conjunction with the following:
5. Removal of further causes and effects with antibiotics, diuretics and physiotherapy.
6. Use of intermittent positive pressure breathing apparatus.
7. More improvements from many treatments result in good over-all improvement.
8. Further bronchial diseases—tuberculosis and carcinoma.

At conclusion of lecture, Mr. Webb moved a vote of thanks, which was carried with acclamation.

The meeting closed at 9.55 p.m., and supper was served.

THE GUILD

S.B.C. Meeting

The State Branch Committee of the Tasmanian Branch of the Guild met at 85 Elizabeth Street, Hobart, on April 27, at 8 p.m.

Present.—Mr. G. M. Fleming (Chairman), Messrs. C. A. Robertson, A. G. Gould, D. R. Crisp, L. W. Palfreyman, E. H. Shield, C. B. Dillon, A. G. Crane, K. H. Jenkins, A. Fennell and the Secretary.

Merchandising and Publicity Scheme.—The Chairman reported that Mr. Bryce Watson would be visiting Tasmania during May and would address meetings at Ulverstone, Launceston and Hobart.

P.A.A. Adelaide Conference.—Advice was received that Mr. J. B. Warland Browne had accepted the Society's request to act as official delegate for this conference.

Finance.—Accounts totalling £532/14/7 were passed for payment.

New Member Elected.—Mr. Frederick John Williams, of Warrane.

Northern Division Minutes.—Minutes of the Northern Division held on April 7 were received.

Trade and Commerce Conference.—Mr. C. A. Robertson was appointed representative to attend this meeting held on August 3 and 4.

Sales Summary.—A summary of a sales survey received from the Federal Merchandising Office was discussed, and members expressed satisfaction with the trends shown therein.

Students' Survey.—A copy of the survey of the Pharmaceutical Students' Association of Australia for 1958 was received.

Pricing Service.—Mr. Dillon and Mr. Robertson reported on progress being made with a new patents list.

They suggested leaving out such items as Kodak, Agfa and Potter & Moore, and some others who provide a full list which can be kept in the same file with our own. Items appearing in the Prescription Proprietaries' list would not be shown again in this list, and items at present being listed, but not sold in Tasmania, would be eliminated.

A final draft would be presented at the next meeting.

P.A.A. Conference Agenda.—Items on this agenda were considered, and notes made for the Branch representative.

The meeting closed at 10 p.m.

GENERAL MEETING OF MEMBERS

A general meeting of members of the Tasmanian branch of the Guild was held at Y.M.C.A. rooms, Hobart, on May 6, at 8 p.m.

Present.—Mr. G. M. Fleming (Chairman), Miss M. L. Williams, Miss E. M. Hurst, Messrs. L. W. Palfreyman, I. B. McLeod, G. S. Copeland, J. M. Beaumont, E. H. Shield, A. G. Gould, D. R. Crisp, W. G. Webb, J. H. Gould, C. A. Robertson, K. H. Jenkins, and the Secretary.

Welcome to Mr. Watson.—The President extended a welcome to Mr. Bryce Watson, who was paying a special visit to Tasmania to address members on developments on the Merchandising and Advertising Scheme.

Half-day Holidays.—Miss Hurst asked regarding clos-

**Your Customers save up to 2/-
every time they buy!**

Johnson's

New Giant ECONOMY SIZE



**This Big Saving
means more sales . . .
and more, much
more profit for you!**

BACKED BY

- Special giant-sized national advertising campaign in women's magazines, radio and TV.
- Attractive eye-catching display material featuring this great consumer saving.

Johnson's
BABY POWDER

IN THE NEW ECONOMY SIZE TIN

FOR YEAR-ROUND PHOTOGRAPHIC TURNOVER **STOCK**

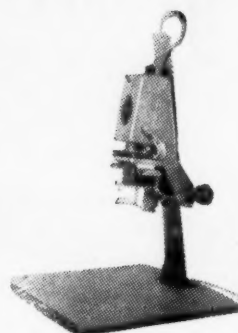
GILKON DARKROOM EQUIPMENT



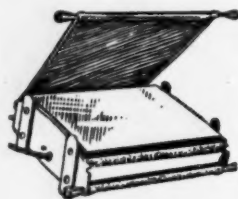
GILKON No. 3 ENLARGER
The most popular Enlarger in Australia. Versatile. Wide range of accessories available.
PRICE £13/18/-



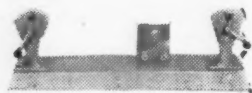
UNIPOL MAJOR DEVELOPING TANK
An easy way for home developing.
PRICE £2/4/-



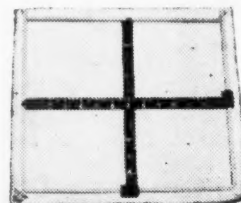
GILKON 35 ENLARGER
An ideal Enlarger for the beginner.
PRICE £20/10/-



GILKON GLAZER
Available in sizes from 10 x 8.



GILKON REWIND OUTFIT
A complete unit for home movie editing and viewing. £13/10/-.



GILKON MASKING BOARD
Indispensable to every darkroom. Available in four sizes.



GILKON REWINDER
For home movies.



GILKON 2 1/2 SQUARE VIEWER
PRICE £7/5/-



GILKON PRINT TRIMMERS
Strong precision guillotine available in four sizes. From 29/3.

AVAILABLE THROUGH YOUR USUAL DRUG WHOLESALER OR DIRECT FROM

H. BLEAKLEY PHOTOGRAPHICS PTY. LTD.

BRANCHES IN ALL CAPITAL CITIES

TASMANIA—Continued

ing time on half-day holidays, as she had found other shops in her area were still open after she had closed.

The Chairman advised that the Guild always adopted the same hours as recommended by the Chamber of Commerce.

Price List.—The President reported that the new Price List was nearly completed, and it was hoped to have the final draft next month.

Medical Benefits.—The proposal to request Medical Benefit members to pay their contribution monthly instead of weekly had been further considered in the light of action taken in New South Wales. The Tasmanian State Branch Committee had decided to leave such an approach in the hands of the individual chemist.

Mr. Copeland expressed concern that the chemist was expected to advise subscribers that their quarterly payment had increased. He had prepared a new schedule and given it to the Medical Benefits Fund, who he understood would distribute these to chemists.

Merchandising Department.—The Chairman expressed appreciation for the work of the Federal Merchandising Department. He considered no one would have imagined they could have achieved all that had been done.

He thanked Mr. Watson for the work his department is doing in the Merchandising and Advertising Scheme, and asked Mr. Watson to convey the thanks of the Branch to Mr. Ross.

Mr. Watson then addressed the meeting on the developments of the Merchandising and Publicity Campaign. He traced the progress through each State, commencing with Victoria, where the scheme was originally started. Results were not felt immediately, but after about three months of advertising and TV programmes reports of progress commenced to be received through various meetings.

Numerous reports now showed that the theme "Ask your Family Chemist—He Knows" was creating a terrific impact, and strong reaction was coming from the chemists. A survey taken showed that 60 per cent. of chemists approached said they had definite results from the advertising, and 66 per cent. of the housewives interviewed had heard the slogan, many women were able to repeat it, many reported they did buy more from their chemist because of this advertising, and from interviews with members in Tasmania similar reactions were being found here, although Tasmania certainly had not yet felt the full impact of the scheme.

New South Wales and Western Australia are in the scheme with Victoria and Tasmania. A such greater impact will be created, and production costs reduced, by working on a Commonwealth basis.

Mr. Watson stressed that the cost of advertising was extremely high, particularly in regard to production of advertisements, but the cost to each State could be greatly reduced by the joint use of preparations.

Queensland were so enthusiastic that they decided to make the contribution 1 per cent. instead of $\frac{1}{2}$ per cent.

The scheme is well planned and organised, for the benefit of pharmacy in general and not for any one section such as town or country.

Mr. Watson stated that chemists do not realise the power they have, and the extent to which the public depend on them.

He referred to the Baby Month Campaign, which had produced excellent results; both Nyal and Johnson & Johnson had considerably extended their advertising allocations to tie in with our drives, and were directing

the public to pharmacy. Other manufacturers were doing the same, as they realised the effect our scheme is having, particularly as we do not specify any particular brands in our advertisements.

Manufacturers who could be interested in our campaigns are advised of our plans, and will co-operate more and more as we progress.

In concluding, Mr. Watson suggested that with any advertising the chemist has the main part to play by display and salesmanship, for it is no use advertising service, if the chemist does not give service.

Members present at the meeting reported that demand was increasing, and they had found greatly increased demand during the Baby Month.

Mr. Crisp stated he had had a number of favourable comments on the Guild advertising.

The Chairman considered this scheme was a most valuable insurance for the future of pharmacists in Tasmania.

Mr. Copeland considered that our theme in selling the status of pharmacists to the public is doing much to restore the prestige of the pharmacist. The chemist must be prepared to have more of his time taken up by the personal attention required from him by the public.

Mr. Watson mentioned the effects that would be felt in Tasmania when television was started.

Mr. Crisp considered we must be prepared to have this form of advertising in Tasmania, and must look ahead to our financial means to cope with it.

Mr. Watson stated that in Victoria they now have 318,000 people to watch our TV session. This session lent itself to certain types of advertising, particularly those requiring demonstrations. He considered radio commercials were still effective during the women's morning sessions.

Mr. Robertson asked if consideration had been given to collecting contributions through other wholesale or manufacturing channels.

Mr. Watson advised this had been considered, but presented much difficulty in administration, and he thought an increase to 1 per cent. on existing channels would avoid the scheme becoming unwieldy, but this rested with the Federal Council.

The Chairman reported that Allen & Hanbury (A'asia) Ltd. had advised that it would be advertising and distributing display material in southern Tasmania.

Mr. Robertson stated that he felt we were missing out by reason of lack of information given to members on advertising which was coming up, and advice on how to co-operate with such advertising. He felt that coloured display cards would be of far greater use than the black and white pulls, and manufacturers should be encouraged to provide samples.

Mr. Watson agreed with Mr. Robertson, and suggested that advice should go out from the individual States to their respective members as to future projects, and how members could best co-operate with them. The cost of providing cards to tie in was beyond their financial capacity at present.

Mr. Robertson stressed that it was most important to carry advertising through to the point of sale.

Mr. Crisp, in moving a vote of thanks to Mr. Watson, said he considered that his address had not only been most informative but educational, and he asked Mr. Watson to convey their thanks also to Mr. Ross for the work being done by the department.

The meeting closed at 9.45 p.m.

NEW SOUTH WALES

PERSONAL and GENERAL

State News

Members desiring publication of personal items of interest are invited to write or telephone details to the Journal Correspondent in N.S.W. Phone BU 3092.

"A fool must now and then be right by chance."

—Cowper.

Mr. W. A. Curry has purchased Alan Olsen's pharmacy, cr. Edgeworth David avenue and Pacific Highway, Hornsby. Mr. Curry was previously in business at Leichhardt.

Miss D. M. Sternbeck has opened a pharmacy at 1B Cowell street, Gladesville. Miss Sternbeck hails from Tamworth.

Mr. L. Davey and **Mr. H. Johnson** have opened a new pharmacy, The Rex Pharmacy, at 382 Barrenjoey road, Newport Beach.

Mr. R. D. Coates has opened a pharmacy at 5 The Mall, Unanderra. Mr. Coates was previously in business at Orange.

Mr. T. Shortis has sold his pharmacy, The Centre, Seven Hills.

Mr. C. L. Diamond has sold his pharmacy at Millthorpe to Mr. Graham Meyer.

The pharmacy previously at 259 Crown street, Wollongong, owned by **Mr. Leon Rothman**, has been closed.

Mr. T. Shanahan, previously of Bankstown, has purchased the pharmacy of Mr. M. S. Clarke, 114 Haldon street, Lakemba.

Mrs. J. G. Hissey has sold her pharmacy at 817 Hunter street West, Newcastle.

Mr. Ron Beesley has purchased Meller's Pharmacy at Milton.

Mr. J. H. Lee has purchased Mr. O. D. Ward's pharmacy at Dungog.

Mr. R. D. Sinclair is now the proprietor of the pharmacy at 316 Pacific Highway, Lindfield.

Mr. J. P. Murphy has purchased Mr. G. M. Harper's pharmacy at 22 Cammeray road, Cammeray. Mr. Harper is now at Katoomba.

Mr. Nicky Drach has opened a pharmacy at 34 Oxford street, Epping.

Mr. B. J. Quigley has purchased the pharmacy at 481 Forest road, Bexley.

Mr. B. J. Hain has opened a pharmacy at Powder Works road, Narrabeen North.

Mr. K. I. Payne is the proprietor of the pharmacy at 280 Clarinda street, Parkes.

Mr. R. J. Baz has opened a pharmacy at 472B Parramatta road, Petersham.

Mr. G. L. Shennan has disposed of the Toukley Pharmacy, 150 Main road, Toukley.

ANNUAL DINNER

The Pharmaceutical Society of N.S.W. advises that the 1959 Annual Dinner will be held on Tuesday, June 16, (6.30 or 7 p.m.) in the Holmes and Sutherland Room, Sydney University Union.

The President extends a warm personal invitation to members to attend. Subscription £2/2/-.

DOCTORS' WORK DEFENDED

Australian doctors gave a tremendous amount of free service, Dr. John Hunter, Secretary of the British Medical Association's N.S.W. branch, said in Sydney recently. He said all N.S.W. public hospitals had public wards where medical service was free.

He was replying to the Apostolic Delegate (Archbishop Carboni), who at Newcastle criticised excessive medical fees.

WITHDRAWAL OF DRUG AUTHORITY

The Under Secretary, Chief Secretary's Department, Sydney, has written under date May 13, 1959, as follows:

"I desire to inform you that a notification will be published in the issue of the Government Gazette on Friday, May 15, 1959, withdrawing as on and from Monday, June 1, 1959, the authority of **Dr. Cecil Hermann Wirth**, of Wrestall Street, Bankstown, to procure and be in possession of drugs to which the Police Offences (Amendment) Act applies for the purpose of his profession and to issue prescriptions for such drugs.

The authority has been withdrawn by the Minister in terms of Regulation 25 under the Act.

Perhaps you would be good enough to publish this information in your journal with a view to ensuring that the matter will be brought to the notice of all concerned."

EIGHTY-SEVEN, NOT OUT

We refer to **Mr. C. F. Stephens**, father of Mr. G. R. Stephens, of Bangalow, who was 87 years of age on May 13. Mr. Stephens served his apprenticeship with Hatton and Laws, of Launceston, 75 years ago. Apprentices then worked 60 hours per week, and for the first two years did not receive any pay at all. In the 3rd and 4th years they received 2/6 and 5/- per week respectively. He then worked in Deloraine, thence Melbourne, and at this point opened the first pharmacy in Peak Hill, New South Wales, on November 1, 1907. He later shifted to Bangalow, where the business has been in the family for 51 years. Fred Holmes, very well known in pharmaceutical circles, was a schoolboy when Mr. Stephens was apprenticed to his father. Congratulations to Mr. C. F. Stephens on achieving 87, not out.

INFLUENZA HITS AT CITY'S WORKERS

Sydney's influenza epidemic was causing "a tremendous amount of absenteeism" in the community, the Metropolitan Medical Health Officer (Dr. Donnellan) said. The epidemic was very extensive. A check with Sydney hospitals confirmed that 23 people suffering from 'flu had died in the past two months. Doctors said nearly all the victims were suffering from other ailment. But they felt influenza had contributed to the deaths. Dr. Donnellan said it could not officially be stated how many deaths the epidemic had caused directly because influenza was not a notifiable disease. The epidemic is not a grave one but it is certainly serious. In a few cases, 'flu victims have suffered complications of staphylococcal pneumonia."

ARCHBISHOP ATTACKS HIGH MEDICAL FEES

The Apostolic Delegate (Archbishop Carboni) recently criticised excessive medical fees. Archbishop Carboni was speaking to a gathering of Catholic doctors at the Mater Misericordiae Hospital, Waratah.

"With your profession making exacting demands upon you, you may at times incline to seek a monetary reimbursement that would ignore the capacity of your patients to pay," he said.

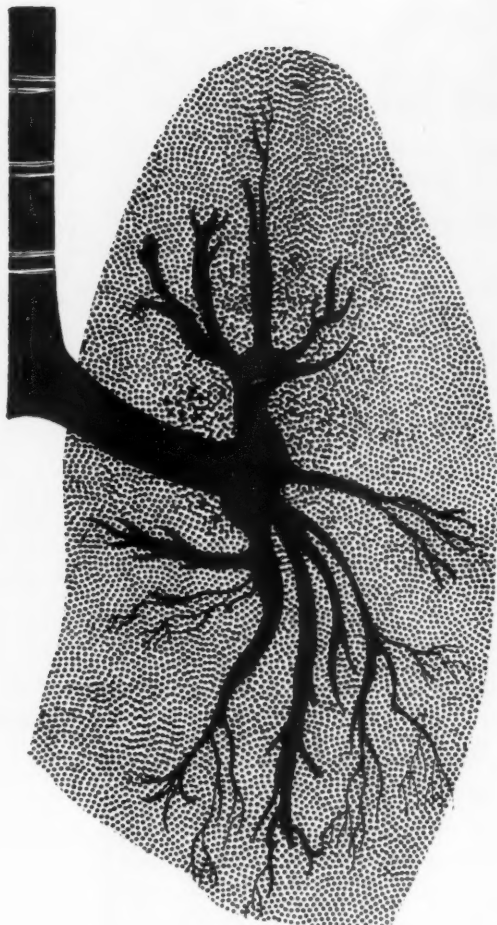
"Even if we have been industrious in exploiting our talents and energies, let us never ask a fee beyond that which is just, personally and socially.

'ROMILAR'

TRADE MARK

ROCHE

**Specific cough
suppressant with
no analgesic
or sedative
effect**



DOSAGE

Adults: 1-2 teaspoonfuls.
or one to two tablets.
Children: $\frac{1}{2}$ -1 teaspoonful or
half to one tablet.
Infants: $\frac{1}{4}$ - $\frac{1}{2}$ teaspoonful.

These doses may be given 1-4
times daily.

PACKINGS

'Romilar' Syrup (15 mg. in 5 c.c.):
In bottles 100 c.c. and 500 c.c.

'Romilar' Tablets (15 mg.):
Bottles of 20 and 200.



ROCHE PRODUCTS PTY. LIMITED
1 BARRACK STREET, SYDNEY

Ads. like these will give a

LIFT to your MEDS SALES



FREQUENT LARGE-SPACE ADS. IN ALL LEADING WOMEN'S JOURNALS

DISPLAY to cash
in on this greatest
campaign ever for
MEDS!

five days of new freedom

What a wonderful, wonderful feeling! No more weekends wasted! Her secret? The safe internal protection that Meds offers. You, too, can follow the sun, wearing your briefest, prettiest clothes... choose absorbent, protective Meds.

Meds—2/6 for a packet of ten or Meds with applicators—4/6.

What a wonderful, wonderful feeling! No more weekends wasted! Her secret? The safe internal protection that Meds can offer. You, too, can follow the sun, wearing your briefest, prettiest clothes... choose absorbent, protective Meds.

Meds—2/6 for a packet of ten or Meds with applicators—4/6.

Meds
THE MODESS TAMPON

Would you like to know about Meds—the internal tampon? Then fill in the coupon and mail to—

NAME _____ ADDRESS _____ STATE _____

1136/PP

NEW SOUTH WALES—Continued

"I beg of you Christian doctors never to forget the example of the Divine Physician.

"He went about curing the sick and working miracles for the poor.

"Yet there is no record that He demanded recompense other than what was freely given.

FILLED MILK BAN

Legislation to prohibit manufacture of filled milk was approved recently by State Cabinet.

The Premier, Mr. Cahill, said that three months after the legislation was passed no person would be able to manufacture, pack or sell filled milk.

Maximum penalty for a breach would be £200 for the first offence and £300 for each later offence.

Mr. Cahill said the Act would not operate until there was some indication of a move to put filled milk on the market. But, with the new law, this would be unlikely.

Filled milk, he said, was any liquid or powder containing the non-fat solids of cows' milk with which was incorporated any fat, other than butter fat or cocoa butter.

He said the words "or cocoa butter" had been included to permit manufacture and sale of such products which do not constitute any threat to whole milk.

Mr. Cahill said the proposed legislation already had been enacted in Victoria, Queensland and South Australia.

VACCINATION AGAINST DIPHTHERIA

The Director of the Commonwealth Serum Laboratories (Dr. P. L. Bazeley) said in Melbourne that planning for a national vaccination plan against diphtheria should start immediately.

He said 'flu was a killer by itself, and did not need to be complicated by other diseases.

"You cannot control 'flu by thinking about it after it hits the country," Dr. Bazeley said.

The Director-General of Public Health in N.S.W. (Dr. H. G. Wallace) said that a large-scale test of the influenza vaccine produced by the laboratories should be carried out to test its effectiveness.

The Chairman of the Victorian Health Commission (Dr. K. Brennan) said influenza in the Victorian epidemic was not as severe as the N.S.W. epidemic. But he knew of several deaths for which influenza could be blamed in Victoria.

Ten cartons of tablets were freighted from Sydney by T.A.A. to meet a serious 'flu epidemic developing in Perth.

HEALTH SCHEME "GROWS"

The Federal Health Minister (Dr. Cameron) said in Sydney on May 12 the people of Australia were satisfied with the way the national health scheme was run.

He said statistics proved this.

Dr. Cameron was opening the annual meeting of the Blue Cross Association of Australia.

Dr. Cameron said Government expenditure on medical benefits had increased from £1,400,000 to £7 million in the last four years he had been in office.

In the same period:

- The pharmaceutical benefits had increased from £9,200,000 to £17 million.
- The Blue Cross hospital benefits coverage had increased from 3,700,000 persons to 4,400,000.
- The Blue Cross medical benefits coverage had increased from 2,300,000 persons to 4,300,000.

Dr. Cameron said population increases were not big enough to account for these rises. The reason was the people accepted the principles of the national health service of Australia and were satisfied with the way it was managed.

DOCTOR FINED ON DRUGS CHARGE

On May 5 Dr. Grace Alison McCormack, 44, was fined £30 in Bundarra Court for administering morphine to herself.

Mr. Curry, S.M., said it was the third time Dr. McCormack had been before a Court on the same serious charge.

He imposed a fine "in view of her apparent sincere assurances of intended treatment" at Royal Prince Alfred Hospital, Sydney.

Det.-Sgt. John Michael Faga, C.I.B. Drug Squad, said Dr. McCormack, between December 30 and January 6, obtained free drug prescriptions in the names of various persons. At her Bundarra home on April 28, she had admitted administering drugs to herself for the purpose of her addiction, he said.

Evidence was given that Dr. McCormack was born in England, had been in Australia 18 months, and in practice at Bundarra since December last.

Dr. McCormack admitted she had been fined £125 for drug order breaches in Britain in 1955. She also admitted a conviction and £10 fine for drug breaches of Victorian Law.

She was a qualified surgeon and a member of the Royal College of Surgeons.

She gave an undertaking to seek psychiatric treatment in Sydney.

THOUSANDS "FACE" MENTAL HOSPITAL

Five per cent. of Australians would spend some part of their lives in mental hospitals, Professor W. H. Trethowan said recently. He was commenting on a statement the Queensland Minister for Health (Dr. Noble) made.

Dr. Noble said that mental illness had reached almost epidemic proportions in Queensland.

Professor Trethowan is Professor of Psychiatry at the University of Sydney.

He said people were beginning to look squarely at the problem of mental illness.

New South Wales hospitals' main problem was a scarcity of staff. Professor Trethowan said a hospital with 1000 beds should have 20 to 25 doctors.

Most New South Wales hospitals of that size had ten doctors.

Patients' response to treatment was directly related to the efficiency of the staff.

Patients would spend less time in hospital if staffs were larger.

Professor Trethowan said Australia needed more accommodation for the mentally ill in general hospitals.

In England big general hospitals had psychiatric out-patients' departments and made provision for in-patients.

Among Sydney's general hospitals only Royal Prince Alfred had accommodation for psychiatric in-patients.

The American Psychiatric Association had estimated every general hospital should set five to 10 per cent. of its beds aside for psychiatric patients.

REGULATIONS UNDER THE N.S.W. RADIOACTIVE SUBSTANCES ACT 1957

The New South Wales Radioactive Substances Act 1957 came into operation on April 6, 1959. Regulations under the Act were gazetted on March 20, 1959, and these are operative from the date on which the Act commenced.

The Regulations lay down conditions concerning irradiating apparatus and radioactive substances, licenses, personnel monitoring devices, the keeping of records, storage, control of exposure, and control of contamination, labelling and packing, transportation, and the disposal of radioactive substances.

Conditions of employment are specified and the duties of radiation safety officers are enumerated.

Schedules I, II and III of the Regulations list radioactive isotopes, and lay down maximum permissible

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NEW SOUTH WALES—Continued

concentrations and the maximum permissible dose to which any radiation worker may be exposed. Schedule four includes the forms of labels which must be used on all containers.

Licenses may be issued for the use of radioactive substances for industrial, diagnostic, scientific, research and therapeutic purposes.

Of interest to pharmacists, in the very unlikely event of it becoming necessary for the retail pharmacist to handle radioactive isotopes, is the fact that a license to "have in possession and to sell radioactive substances" may be granted to authorised persons. Similarly a licence is required to "have in possession and use" radioactive substances.—F.H.B.

REGULATIONS UNDER N.S.W. FLUORIDATION OF PUBLIC WATER SUPPLIES ACT 1957

The Regulations under this Act were gazetted on March 20, and came into effect on April 3, 1959. Fluoridation is of general interest to pharmaceutical chemists and we give below a brief synopsis of the main operations of these regulations.

Application for the Board's approval to add fluorine to any public water supply must be made to the Secretary of the Board. Any water supply authority to whom an approval has been granted is required to make tests of samples of water at such points as the Board may determine, at least once a month: to make tests of treated water taken as it leaves the fluoridation plant at least once every 24 hours; to make tests of samples taken from at least two points in the reticulation system at least once a week and to forward to the Board a sample of water taken under any of the above circumstances when required.

Water supply authorities are required to keep accurate records of the volume of water treated, the weight of fluorine added and the results of analyses and tests. Reagent solutions used in analysis are required to be not more than three months old and persons preparing reagent solutions are required to note on the label the date on which such solutions were prepared.

The equipment by which fluorine is added to the water supply must comply with an accuracy within plus or minus 5%.

Containers containing fluorine are required to be stored apart from other chemicals used in the water treatment plant to obviate the possibility of accidental over-use of fluorine.—F.H.B.

NEW T.B. "BLITZ" STARTS

All Sydney food handlers and hairdressers will be X-rayed in a new move to check the spread of tuberculosis.

In a similar survey two years ago 16 cases of active tuberculosis were discovered.

Fifteen of them were food handlers and the other a hairdresser.

Dr. C. Rubinstein, medical director of the mass X-ray surveys of the Anti-tuberculosis Association, said that the check would coincide with the X-ray survey of Sydney's inner city area, which started on May 5.

Survey teams have opened X-ray units at King's Cross, Rushcutter Bay and Potts Point.

They will stay there for about a fortnight before moving on to Elizabeth Bay, Paddington and Darlington.

This is the fourth anti T.B. campaign to be conducted in the inner city area. The last was two years ago.

Dr. Rubinstein said that the mass survey system had proved extremely successful.

"More than half a million people in New South Wales were X-rayed last year," he said.

"We have succeeded in detecting many early cases of tuberculosis, and many of these people are already cured, or well on the way to being cured.

"Many of the 1300 cases of T.B. notified last year would not have been discovered without our surveys.

"The number of people who die from T.B. is dropping."

Dr. D. Rubinstein said the X-rays were also detecting many other complaints which people did not know they had.

Many cases of cancer, congenital heart disease and dust disease had been discovered.

He said it was particularly necessary for people over 40 to have a chest X-ray.

CHEMISTS (STATE) AWARD

Basic Wage Adjustment

(Effective as from the first complete pay period in May, 1959)

Managers:

Up to 4 assistants	£21 11 0
5 to 9 assistants	22 6 0
10 or more assistants	23 6 0

Relieving Managers: Rate per hour—One-fortieth of weekly rate prescribed for appropriate classification, plus 10%.

Chief Assistants £20 16 0

Registered Assistants 20 6 0

Relievers: Rate per hour—11/2; minimum payment four hours.

	Males per week	Females per week
Shop Assistants:		
Under 16 years of age	£5 10 0	£5 10 3
At 16 years of age	7 1 8	6 11 2
At 17 years of age	8 15 8	7 12 2
At 18 years of age	10 12 6	8 10 0
At 19 years of age	13 0 11	9 11 1
At 20 years of age	14 9 0	10 6 6
At 21 years of age	15 14 0	11 5 0
At 22 years of age	16 14 0	12 5 0

(Shop assistants required to carry out dispensing under supervision shall be paid 30/- per week in addition to the appropriate rate of pay prescribed by the scale of rates for shop assistants in this sub-clause.)

Casuals: Rate per hour—Under 21 years, one-fortieth of the 19 years old rate plus 12½%; over 21, one-fortieth of the 22 years old rate plus 12½%.

University Students: Rate per hour—8/3 9/10; minimum payment 15 hours.

Apprentices:

First year	£3 9 6
Second year	4 17 4
Third year	6 7 3
Fourth year	7 0 1

SLEEP DRUG WARNING

A doctor writing in "The Medical Journal of Australia" has condemned the increasing use of barbiturate drugs for sleeplessness. "Most hypnotic drugs procure sleep at the expense of increasing confusion," he said. "This step should be the last step—not the first."

The writer, Dr. Barry Mulvany, of London, said that Britain's National Health Service in the last year spent £1,600,000 on barbiturates alone. "A common notion about fatigue is that it is relieved by sleep," he added. "This is a lay concept, which has no basis in fact. In some cases, what is needed is not retirement to bed but activities which are the complete reverse of those which engendered the fatigue.

"If the surgeon or physician took cognisance of the total situation of his patient simple measures might cancel the need for the increasing consumption of hypnotics," the writer said.

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NEW SOUTH WALES—Continued

sleep is to give him hypnotics and turn the light down low.

"For a confused patient nothing could be farther from the truth. He should be nursed in a room lit to a degree of illumination close to that of daylight."

Dr. Mulvany said that gaol prisoners sleep well, and prisons spend very little on barbiturates. Dr. Mulvany added that a prodigious increase in the consumption of hypnotic drugs has accompanied "the commercial exploitation of bedding."

"The question arises whether soft comfort in the design of bedding is desirable," he added.

"Specially trained Commandos could sleep in conditions of extraordinary discomfort. Then the post-war wife was confronted with an ex-Service husband who could sleep only on a hard floor."

BITTEN BY TRAPDOOR SPIDER

DISCUSSION RE USE OF CONDY'S CRYSTALS

During the month Sydney papers reported the case of a Willoughby woman who was bitten by a trapdoor spider and as a result suffered severe pain. She was bitten by a spider on the right thumb about 4 p.m. and did not recover fully until 9 p.m.

The victim, Mrs. Butler, said that her son cut through the puncture in her finger with a penknife and rubbed in Condy's Crystals. She perspired and felt dizzy for two or three hours and then the effects wore off.

The newspaper which published the report quoted an authority as saying that trapdoor spiders, unlike their deadly relatives—the funnel webs—which do not make trapdoors, are usually regarded as harmless.

The correspondent in "The Sydney Morning Herald" wrote: "In her report of the case, it was stated that the affected spot was cut and Condy's Crystals rubbed in. The blame for this mistaken treatment seems to rest with the New South Wales Department of Health which, in public posters (still in use on ferry boats and elsewhere), advises that Condy's Crystals should be rubbed into bites, both of snakes and spiders."

"It is now more than 20 years since Dr. C. H. Kellaway, then Director of the Walter and Eliza Hall Institute, pointed out that although Condy's Crystals (Permanganate of Potash) would destroy venom left on the skin, they were not only useless when rubbed in, but actually caused harm by coagulating the blood and damaging tissues. This opinion was supported by other authorities of the day and has since been endorsed many times both here and in the U.S.A."

Comments of the Health Department were published in the "Daily Telegraph," 5/5/59. The Director-General of Health stated that the Department would not remove the posters referred to. Condy's Crystals were a long standing treatment for snake and spider bites.

The correspondence continued for two or three days, and in a later letter the correspondent already referred to wrote:

"Other authorities that have warned against the outmoded treatment include the California State Department of Health, which says in its list of 'what not to do' in cases of snake bite—don't injure tissues by injecting Permanganate of Potash which is known to be of no value as an antidote."

BENEFITS

The views expressed by Mr. Maurice Whitten ("Daily Telegraph" Letters) about the payment of benefits by the Hospitals Contribution Fund of N.S.W. are worthy of consideration by all contributors to the fund.

The Hospitals Contribution Fund benefit should be compared with those paid by the Medical Benefits Fund. One very important difference in the management of the two funds is apparent.

The Medical Benefit Fund in N.S.W. has five members on its N.S.W. Executive Committee appointed to represent the interests of the contributors to the fund.

The contributors to the Hospitals Fund have no direct representative on the Fund, and furthermore, a contributor to the Hospitals Fund is not permitted to attend its annual meeting.

As I was not satisfied with a decision of the Hospital Fund, and did not consider its benefits compared favourably with those paid by the Medical Fund, I asked for an opportunity of attending the annual meeting of the Fund to place my views before the Executive Committee.

During September, 1958, I received the following reply:

"... this is a private organisation and only committee members of the various hospitals who are associated with our organisation are permitted to attend."

A further factor which should surely be taken into account by the management of the Hospitals Fund is that the liabilities of this fund are more limited than those of the Medical Benefits Fund.

There are only a limited number of hospital beds in this State which can be occupied at one time, so the Fund should have some idea of its daily maximum liability to pay benefits.

The Medical Benefits Fund, on the other hand, would find it almost impossible to assess its daily liability owing to the seasonal fluctuation in illness, etc.

It seems strange that despite this fact the Medical Benefits Fund can afford to be so much more generous in the payment of benefits.

I would suggest to all members of the Hospital Contribution Fund that they approach their Federal Member and request that the Federal Government appoint a committee to inquire into the working of the two funds, and endeavour to amalgamate the administration.

This should lead to great economy, the savings of which could be used in the payment of increased benefits.

Contributors should be represented on the Executive Committee.

Major Funds Pay Record £22 m. in Sick Benefits

The seven major hospital and medical benefit funds in Australia last year paid out more than £22 million in benefits, the Chairman of the Blue Cross Association, Sir Herbert Schlink, said in his report to the eighth annual general meeting of the association.

The Federal Minister for Health, Dr. D. A. Cameron, opened the meeting.

The Blue Cross Association is the co-ordinating body of seven hospital and medical benefit organisations, namely the Medical Benefits Fund of Australia, in N.S.W., the Queensland and Tasmania, the Hospitals Contribution Fund of N.S.W., the Hospital Benefits Association of Victoria, the Mutual Hospital Association of Adelaide and the Hospital Benefit Fund of Western Australia.

Sir Herbert added that this sum included Commonwealth Benefits, and exceeded by £5 million the previous annual record payment of £17 million.

During the year, 370,000 people joined the funds and it was expected another half million people would insure themselves with the funds during the current year.

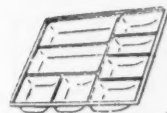
Membership of the seven funds was now 4,370,000 or 69 out of every 100 people insured for national health hospital and medical benefits.

Sir Herbert said that a reciprocity arrangement had been made between the Australian Blue Cross Association and the Blue Cross Associations in the United States and Canada.

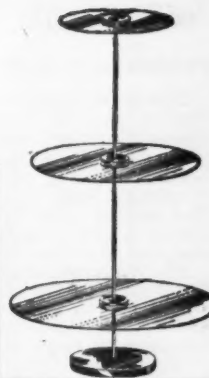
Under the arrangement, Australians taking up indefinite residence in either of these countries would become eligible for benefits there, and would incur no interruption of their continuity of membership in the funds.

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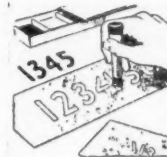
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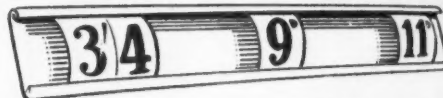
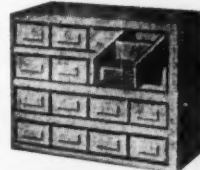


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NEW SOUTH WALES—Continued

PRESENTATION OF REGISTRATION CERTIFICATES

Certificates were presented to recently graduated pharmacists at a function held in the Stawell Hall, 145 Macquarie street, Sydney, on April 28.

Opening proceedings, the President of the Pharmaceutical Society of New South Wales, Mr. Aubrey Winterton, said, "I am pleased to see so many here. The hall is filled to capacity, with some standing. I extend a special welcome to the graduates here tonight, and also their proud parents and friends."

Mr. Winterton spoke of the gratitude graduates would feel towards their parents who put them through their studies. They also owed a lot to their teachers, masters and lecturers, and finally to the examiners who somehow got them through. (Laughter.)

"I extend a welcome to Professor Wright, Mr. Barry Brown and Mr. H. W. Read. Actually, Professor Thorp, Miss Large and Mr. Thomas were unable to be present."

Mr. Winterton then introduced those on the dais to the assemblage, Mr. Conolly, Secretary of the Society, Mr. C. G. Gostelow, President of the Pharmacy Board of New South Wales, and Mr. Cameron, Under Secretary, Department of Health.

The purpose of this function, he said, was to present Certificates of Registration to newly qualified pharmacists. The Society in conjunction with the Pharmacy Board had been conducting these functions for a few years.

Mr. Winterton then called upon Mr. Gostelow to

address the graduates, parents and friends assembled.

Mr. Gostelow said, "Mr. Chairman, ladies and gentlemen and the newly qualified. First let me express through you, Mr. President, to your Council, my personal appreciation of the invitation to present the diplomas and address the successful candidates."

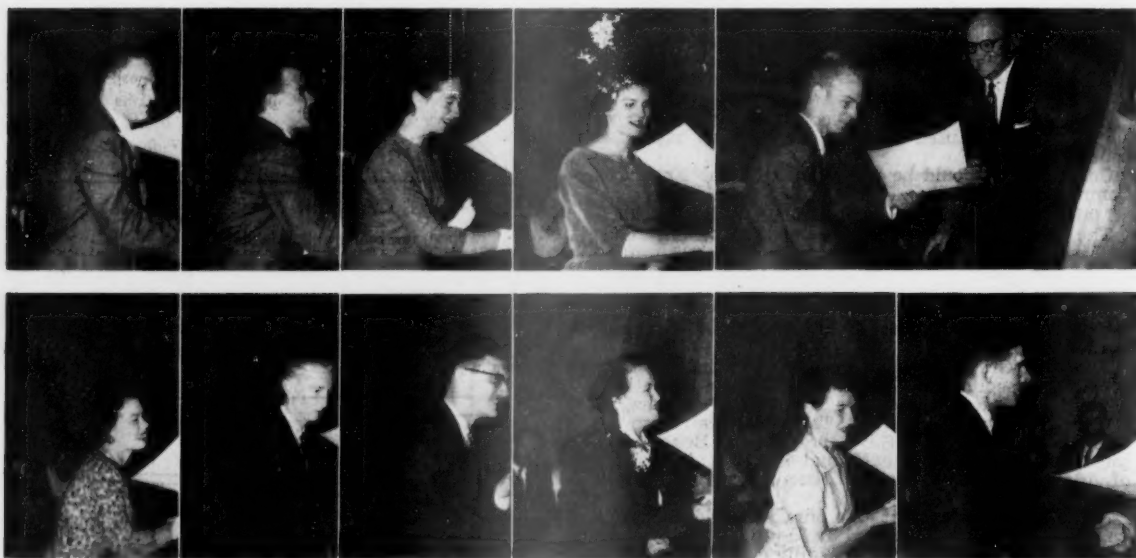
It has been customary since the inception of these presentations, some years ago, to invite some noted personage from without our ranks. We have been honoured in the past by the Vice-Chancellor of Sydney University, by the Premier of the State, by Professors from our University and last year by the Governor of one of our State Banks.

My Board is most happy that on this occasion Pharmacy has been conceded the honour.

It is my pleasant duty, on my own behalf and on behalf of all assembled here, to offer our heartiest congratulations to the newly qualified.

I am well aware of all the shortcomings of the course that you have just completed, of the broken time at the University, of working till late at the pharmacy, and arriving home many a time too tired to face the evening study. I am also aware of the rapid development of pharmaceutical science with no commensurate increase in teaching hours, thus compelling you to cram too much into too little time. You have indeed attained your present position by hard work, and success now justly crowns your efforts.

Secondly, I would like to say to the parents here assembled, how happy I feel for them, on this very auspicious occasion. I know only too well of all the worry, anxiety, care and expense that has been yours



Mr. C. G. Gostelow presenting
Certificates to Diplomates.
(Left) Section of the large audience
of two hundred.



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NEW SOUTH WALES—Continued

over these long years of study. The anxious and jittery days when son or daughter was sitting for exams; the patient waiting for their return home, with the news of a good paper or perhaps a bad one; the tedious wait for results, and then the sympathy, tact and encouragement necessary, should the name be missing from the pass list or the joy and exhilaration when successful.

I often wonder in this age when so much is taken for granted, if young people realise all that parents have done for them over the years of High School and University; the cost that in many cases proves a sacrifice, but particularly the affection and encouragement that reaps its true reward in your success.

Mr. Gostelow continued: "At the same time don't forget to say 'Thank you' to those who have made it possible for you to be in the position you are in tonight, on the threshold of a good and sound career. During your latter years at High School and throughout the University your one aim has been to qualify yourself for the Career ahead; you worked, year by year, ever looking to the goal ahead.

This set purpose reminds me of a poem you have probably all read relating how a youth set out to reach the top of the mountain, how he kept on always climbing despite storms and avalanches, or in the words of the poet, A youth who bore mid snow and ice a banner with that strange device 'Excelsior'. The import of the word I believe is 'Ever onward' or 'Ever upward.' I would liken each of you to this youth.

Such might have been your watchword, with every exam bringing you nearer the summit, with some bitter disappointments here and there that set you back, but still your eyes were fixed on the distant goal, and here tonight you feel fulfilment.

Without being depressing on an occasion such as this, I feel it my duty to point out to you that you are only half way to the top after all. Where you stand now may have seemed, from away below, to be the peak, but you are now on a ridge with another peak rising further on. Perhaps not so steep, the going is much easier, but still it will require an effort.

You have finished your academic studies apart from keeping abreast of current discoveries—and your Journal of Pharmacy should be your handbook in this regard—but ahead of you is the need to make yourself 'au fait' with the commercial side of our business. You must learn to buy and sell, a simple statement that sounds elementary, yet success is governed by sound buying. You will need to know what to buy, where to buy it, the special discount parcels available and so on. You must learn to sell, to tactfully handle all your customers and establish customer relationship. How to display goods, how to window dress, how to keep your books, check invoices, with a knowledge of wholesale prices, keep your accounts. Price and control the transactions of your biggest customer, the Commonwealth Department of Health, with its free medicine schemes. Control staff, stock taking and a host of other details.

How are you to acquire this additional knowledge—books? No, although you could teach yourself some of it. The answer is experience. Up to the present most of you have been employed in one shop only and so have absorbed the methods of one master. Whether those methods were good, bad or indifferent you will not be in a position to judge until you have compared them with those of other pharmacists with whom you will work. Working in other pharmacies as assistant, manager or relieving manager will then provide the necessary tuition, provided you yourself have the three following qualities.

1. The desire to learn. When you take a job now as a qualified, the incentive should be more than the £ s. d. involved. You must be determined to learn as much as possible of that pharmacist's methods.

2. You must have an inquisitive and receptive mind.

Inquisitive in that you must ask the why and the wherefores of methods that you observe and interest you, and receptive in that you must store up for future use all that you find useful and valuable.

3. The ability to sift the good methods and ideas from the bad ones, for you will undoubtedly find some bad ones in your various journeys.

From this experience you should get a clear picture of sound business methods to put into application when you control the affairs of a pharmacy.

This 'modus operandi' could be classed as the machinery of running a pharmacy, but over and above that you must learn your responsibilities to the public from whom you derive your livelihood. Learn to be honest and sincere in your business dealings, and you must cheerfully embrace the opportunity of giving that service Pharmacy is so proud of.

Now you are fully qualified you must assume your full legal responsibilities under the Pharmacy Act, D.D. Act and Poisons Act. You must never leave the shop under any control save that of a registered chemist. The key to the Dangerous Cupboard must be in your possession. You must instruct your staff in what lines that must be labelled with name and address and also as to what items cannot be sold over the counter. If you are managing someone else's shop and the staff say 'we also sell such and such,' don't be sidetracked, ensure that they do what you believe to be correct, for rest assured that you will be held legally responsible even if you should be away from the premises.

During this upward climb we have been speaking about, you are bound to see here and there, sidetracks leading off along easier gradients. Those of you who have done any mountain climbing will have seen these so-called goat tracks, in our case they could be labelled 'Slipshod dispensing methods,' 'Doubtful business dealings,' 'Outright dishonesty and malpractice.' Unfortunately we live in an age when these things are all too prevalent.

To turn aside along these paths, which at first sight may appear to offer quick or easy money, is to head back down the trail you have been so diligently ascending.

The discredit and disgrace you may incur falls not only on your head but brings suffering to your family and places a stigma on the profession of which you are now a member.

What more sorry task has my Board to perform than to submit to the Governor the name of one of our calling, guilty of a serious offence, and to see the registration once handed him in honour, now taken away from him in dishonour.

In later years, after you have derived much from this profession of ours, consider yourself obliged to put something back into the calling by taking on the responsibilities of such offices as Councillor of the Society, or a member of the Pharmacy Board or Guild Committee.

Someone has to do the work, to carry on the standard handed over to us by those stalwarts of the past who have made your lot so much easier, hours shorter, remuneration higher and your position more worthy.

With no thoughts of reward these men have given much often to the detriment of their businesses and health and in some cases it has cost them their lives. I think of men like the late Orion Leggo, who, despite continued medical advice to give official work away, remained on every Board in Pharmacy, and drove himself with fanatical zeal to further the interest of the profession he so dearly loved, until finally it proved too much for an overtaxed heart. Such examples as that will I am sure influence you late in life to come forward when called upon to do your part.

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NEW SOUTH WALES—Continued

honoured by your confreres in the profession and those of allied professions, then you can lay down the banner, for you have truly reached the summit. A summit not conditioned by how much money you have accumulated but by how much respect.

In our profession a man is not esteemed according to his worldly possessions, whether his business is large or small, but rather as to how he conducted that business. Did he earn the respect of the pharmacists around him or did he ride rough shod over them to further his own aims.

This and this alone is the summit to which you should all aspire, and when you reach it you will feel deep down within yourself the immense satisfaction of having been of service to others, and of responsibilities faithfully discharged." (Prolonged applause.)

Mr. Gostelow then presented Certificates to: Neville Leslie ADAMS; Mathew ARAMATY; Robert Eric BRADLEY; Robert Edward BRADY; Margaret Anne BROWN; Jennifer Nellie BUCKLEY; Mrs. Irena BIAL-KOWSKI; Joan Wylma BARTLETT; Frederick Nicholas BIBLE; Anne BRODIE; Anthony Michael CAWLEY; James Ronald COOPER; Bryce Frank CRAZE; Jann COLLESS; Charles COMINO; John Michael DALEY; Mary Beatrice DELAMONT; Lawrence Bernard DODDS; Bruce Hayward DOWNIE; Camille DONNEL-LAN; Neil Walter DUNCAN; Bernard Samuel DANKS; Diane Cain GRAHAM; Anthony John HARKIN; Margaret Ann HEANEY; Warren John HOWARD; Colin Edward HUBBARD; John Patrick HEFFERNAN; William John JEFFREY; Norma Frances JOLLOW; Suzanne Mary KELLY; Virginia Frances LAHEY; Leonidas LEVENDIS; David James LINDSAY; Helen Mary LINDER; Peter Geoffrey McFARLANE; Peter Stuart MARSHALL; Ruth Marie MONRO; John Bertram MURRAY; Anita Joyce MEGGITT; James Stephen MAYSON; John Carlson MORRIS; Graham Bruce O'TOOLE; Anthony William OSBORNE; Barry John PARSONS; Elaine Joy PILL; Margaret Joy PAYNE; Kenneth Joseph PEOPLES; Alan George PIKE; Carole Ann PULLE; Bruce Michael ROGERS; Roslyn Patricia RICHARDS; Barry William SLACK; Ena SILVERMAN; Barry Darch SMITH; Robin Mary SMITH; Launcelot Clement TYSON; Margaret Joyce WILKINSON; Charles Richard WATKINS; Robert Henry WEBB; Peter James WILDBLOOD.

Vote of Thanks

Mr. Winterton then called on the Vice-President of the Pharmaceutical Society, Mr. John Plunkett, to propose a vote of thanks to Mr. Gostelow for his fine address and for presenting the Diplomas.

Mr. Plunkett: "We have been honoured here tonight with the presence of one of the best known and popular members of Pharmacy today, Mr. Cliff Gostelow, who is President of the Pharmacy Board and Chairman of Directors of the Wholesale Drug Company. For many years he has lectured to First Year Apprentices and has also been associated with the final examinations at the University. In addition to these activities, for many years he was closely linked with the Chemists' Golf Club. Tonight he has favoured us with an outstanding address. I have never heard an address so quite to the point. I can assure you that he spoke from experience. He carries on his own business in just the way he has spoken to you. I ask you to carry a vote of thanks by acclamation."

Mr. Winterton said: "I endorse the words spoken by Mr. Gostelow when he stated that some of the works of the Society related to the inculcation of an ethical standard. I would like to refer to the presence of Mr. Cameron, the Under Secretary, when we have approached him on matters of importance. He has always been most helpful to us."

Mr. Winterton then welcomed visitors from Maitland, and the function drew to a close.

PHARMACY BOARD

Monthly Meeting

The Pharmacy Board of New South Wales met at 52 Bridge street, Sydney, on April 14, at 8 p.m.

Present.—Mr. C. Gostelow (Chairman), Messrs. L. W. Smith, K. Cartwright, G. Simpson, G. Mallam, E. Dempster, G. Harman, Dr. S. Wright.

Inspector's Reports.—Prosecutions were authorised against two chemists who continued to practise although they had become unregistered by failing to pay the Annual Roll Fee within the prescribed time.

D'Arcy G. Mitchell, sale of goods containing poisons, previously purchased at auction.

In view of Mr. Mitchell's action in disposing of these goods, the Inspector's report was received.

Applications for Registration were approved, as follows:—

(a) Having passed Qualifying Examination: Joan Wylma Bartlett, Frederick Nicholas Bible, Janice Jean Blunden, Anne Brodie, Lloyd Charles Carroll, David Reginald Cheers, Jann Colless, Charles Comino, Bernard Samuel Danks, Catherine Elder, John Patrick Heffernan, William John Hill, Peter Geoffrey McFarlane, James Stephen Mayson, John Carlson Morris, Robert William Nader, George John Nimciw, Anthony William Bruce Osborne, Catherine Mary Page, Kenneth Joseph Patrick Peoples, Alan George Pike, Carole Ann Pule, Roslyn Patricia Richards, Ronald Edward Roberts, Maxine Patricia Sharpe, Ena Silberman, Barry Darcy Smith, Robin Mary Smith, Annette Whitaker, Peter James Wildblood and Kenneth Parker Wilson.

(b) By Reciprocal Agreement: Margaret Diane Campbell (from South Australia), John Vaughan Spick (from South Australia), William Fraser Wilson (from South Australia), John David Clifford (from Queensland), Harold Robert Lenehan (from Queensland), Sidsel Woxen (from Queensland), John Vincent Winson (from Victoria).

Names Restored to Register.—Alexander Goldberg, Patrick James Flanagan, Sybil Baker.

Certificates of Identity were issued to Anthony Michael Cawley (to Queensland), Graham Frederick Hurd (to Queensland), Margaret Ann Lazner (to South Australia), Shirley Laura Watkins (to South Australia), Maxine Patricia Sharpe (to Great Britain), Kerry Colefax Thew (to Great Britain) and Ian William Alexander Dean (to Great Britain).

Poisons Act.—Deaths from the following poisons have been reported since last meeting:—Arsenic, 2; Carbital and Valamin, 1; Barbiturates, 4.

Leaving Certificates Accepted.—47.

Apprenticeship Indentures.—Registrations comprised 66 new indentures, 15 transfers, 2 cancellations, 6 extensions and 2 resumptions.

Poisons Act.—Inquiries were received concerning sale of products containing—

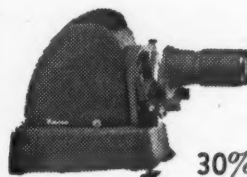
- (1) penicillin and nitrofurazone.
- (2) 56 per cent. commercial Phosphoric Acid.
- (3) Guaiacyl Glyceryl Ether.

Suitable replies were directed to be furnished by the Registrar.

Conference of Boards—Adelaide:

- (1) Copies of the proposed Agenda were handed to members who would be attending the conference.
- (2) Appointment of Voting Delegate. Mr. C. G. Gostelow was appointed as Voting Delegate and Mr. L. W. Smith as substitute, if necessary.
- (3) Agenda Items: These were examined and approved. The Registrar undertook to compile information for submission to the Conference.
- (4) Agenda for Pharmaceutical Association of Australia Meeting: Noted.

Correspondence.—From the Under Secretary, advising



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AUSTRALIA

NEW SOUTH WALES—Continued

date of Conference with the Minister to discuss a proposed new Pharmacy Act. Noted.

From the Sydney University Students Representative Council: Commemoration Day Function. The Council was to be advised that the matter raised was not one which came within the functions of the Board.

Termination of Apprenticeship System.—It was decided to recommend to the Department that the proposed date of termination of the apprenticeship system be altered to June 12, 1959.

Board Election 1959.—Messrs. Simpson and Mallam were required to seek re-election to the Board. The date of election was to be July 16.

MAY MEETING OF THE PHARMACY BOARD

The Pharmacy Board of New South Wales met at 52 Bridge street, Sydney, on May 12 at 8 p.m.

Present.—Mr. C. G. Gostelow (Chairman), Messrs. L. W. Smith, K. Cartwright, G. Mallam, G. Simpson, E. Dempster, K. Thomas and Dr. S. Wright.

Applications for Registration were approved, as follows:—(a) Having Passed Qualifying Examination—Barbara Mary Anderson, Ross William Holland, John Philip Rolleston, Roland William Manning, John Alexander Robinson, Keith Webber. (b) By Reciprocal Agreement—Brenda Margaret Boyd (from Victoria), Maurice Lindsay Bull (from Victoria), Paul Robert Davies (from Victoria).

Names Restored to the Register.—Robert Dudley Kirby, Margaret Adrienne Neale.

Certificates of Identity were issued to: Arthur Leslie Smith (to Queensland), Janice Jean Blunden (to Queensland), Allan James Knox (to Great Britain), Robert Lazzarini (to Great Britain), Rupert William Munson (to Victoria), John Robert Winning (to Victoria), Graham Thomas Lake (to Queensland, Victoria, Western Australia and South Australia).

Application for Consideration—Foreign Pharmacist.—Neda Matkovic, Yugoslavia. Referred to the sub-Committee on Foreign Pharmacists for consideration and report.

Poisons Act.—The following poisons were reported as having caused death since last meeting:—Bromide Co., 2; Seconal Co., 1; Barbiturates, 7; Strychnine, 2; Chloral Hydrate, 1; Lysol, 2; Ferrous Sulphate, 1.

Leaving Certificates Accepted.—7.

Apprenticeship Indentures.—Registrations comprised 54 new indentures, 8 transfers, 1 cancellation and 3 resumptions.

Correspondence.—From Health Department—Inquiry as to control of Phenacetin, Guaiacyl, Glyceryl Ether, Pholcodine and Phenylephrin Hydrochloride. The Registrar was advised of the appropriate reply.

Proposed New Pharmacy Act.—Mr. Gostelow verbally reported the result of a conference with the Under-Secretary.

PHARMACEUTICAL SOCIETY

Council Meeting

The Council of the Pharmaceutical Society of New South Wales met at "Science House," 157 Gloucester street, Sydney, on May 5 at 7.45 p.m.

Present.—Councillors A. F. Winterton (in the chair), E. G. Hall, K. A. Cartwright, Mavis Sweeney, S. E. Wright, G. G. Benjamin, S. Palfreyman, B. G. Fegent, J. F. Plunkett and W. R. Cutler.

June Council Meeting.—Mr. Hall pointed out that the next ordinary Council meeting would fall on June 2,

when the President and a number of Councillors would be away at the P.A.A. Conference in Adelaide. It was resolved that the meeting be postponed until June 8.

Death of Mrs. Winterton.—Mr. Hall said that on behalf of Council he would like to express to the President, their profound sympathy in the sad loss he had experienced at the death of his wife. Councillors expressed their deep condolences.

Mr. Winterton said he appreciated the words spoken by Mr. Hall; it was indeed a great loss.

Equipping of Pharmacy Laboratories.—Further donations received: R.S.S.A.I.L.A. N.S.W. Chemists' Sub-Branch, £25; Geigy (Australasia) Pty. Ltd., £150 (further cheque next year for the same amount).

List of firms to be contacted during 1959: Mr. Hall said that there was no report available yet on this list.

1959 proceeds of call to date: £3,632/0/6.

P.A.A. Conference, Adelaide, May 25 to June 2: Discussion of Conference Agenda.—It was decided to discuss the Conference Agenda at a special meeting to be held on May 18.

Proposed Pharmacy Week.—For discussion at the meeting on June 8.

Lecture Series.—Councillor Wright said it was a matter of getting down to actual dates.

It was decided to commence the lecture series on Monday, June 22. A second lecture to be held on June 29.

Councillor Wright suggested the subjects could be: Diuretics: (a) Physiology; (b) Chemistry. To be followed by a film, the total time occupied to be 1 hour 20 minutes.

It was decided to pay for the lectures, and for Councillor Wright to plan other lectures in the series on suitable dates. Councillor Wright also to contact the lecturers.

Presentation of Registration Certificates.—Mr. Winterton said this function had concluded satisfactorily, the hall being over-full. Mr. Gostelow had given a very down-to-earth address.

It was decided to bear in mind the necessity for securing a notability to present the certificates and prizes at the next Presentation Ceremony.

Annual Dinner, Holme & Sutherland Room, June 16.—Mr. Winterton said he had seen the Union with regard to the menu. Two waiters would be needed.

The matter of selecting wines, etc., was referred to the Executive to decide. The subscription had been fixed at £2/2/- per person. It was decided to give publicity to the Annual Dinner.

First Year Apprentices' Lectures.—Applicants to date, 30. It was mentioned that the lectures would commence on June 10, in the Stawell Hall at 9 a.m.

Pharmacy Ball, August 10.—Menu, referred to the Executive. Admittance charge was fixed at 25/- per ticket. The Secretary said the terms were slightly increased on last year by about 1/- per head.

Country Lectures: Locale.—The Secretary said that Mr. Sam Morris had called at the office, stating that the Zone Secretary, Mr. Duncan Cruickshank, would be writing in a few days time concerning lectures at Newcastle.

Regarding the division of the State into separate areas, it was decided to go ahead with this planning.

The exact locale of lectures to be left until the State had been divided into appropriate sections.

Application of the Provisions of Article 20 in Relation to Payment of Subscriptions.—Mr. Winterton said this matter had been raised at the last meeting. However, there were certain cases he could quote in the matter. For example, where a member (female) got married, and perhaps 15 years later lost her husband, they would



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NEW SOUTH WALES—Continued

not charge her the back subscriptions if she went back into pharmacy.

A Councillor: "I am not talking about that kind of thing at all. I refer to people going abroad for 18 months or two years. That is the type of thing I referred to. They should pay the Society subscription while they are away."

Mr. Winterton: "It is mandatory to join the Pharmaceutical Society of Great Britain before you can practice in England."

Councillor: "It would be quite simple to have a small statement typed out and attached to letters written when acknowledging resignations. This would let them know the provisions of the Articles. It is no use saying the provisions are in the Articles. They do not know they are there."

The matter was allowed to rest.

Correspondence.—From Pharmaceutical Association of Australia, advising that the Society's remit on Pharmaceutical Research had been picked up and would be included in the agenda.

Pharmaceutical Association of Australia, additional items for agenda, "Advertising of Medicinal Preparations," "Sale of Medicinal Preparations."

From Geigy (Australasia) Pty. Ltd., Botany, forwarding cheque for £150 towards equipping of laboratories in the new Pharmacy School. A further cheque for the same amount will be sent at the beginning of 1960.

From R.S.S.A.I.L.A. N.S.W. Chemists' Sub-Branch, forwarding cheque for £25 as a donation from the Sub-Branch towards the Society's appeal for equipment for the Pharmacy School. The cheque was very much appreciated.

From N.A.P.S.A., forwarding a copy of the report of the survey conducted by the National Society last year. It was decided to rotate the report among the Councillors.

New Members Elected.—Mrs. Barbara Mary Anderson (nee Whiting), Warren Leslie Baker, Robert John Bowman Bearup, Barry Darcy-Smith, Peter Rodney Laurantus, James Stephen Mayson, Kenneth Joseph Patrick Peoples, Graham Donald Meyer.

Advanced to Full Membership.—Anne Brodie, Anthony Michael Cawley, Ruth Marie Monro, Ian Rolfe.

Associate Members.—Henry Golding Donovan, Ian Ronald Fielding, Douglas Ross Grantham, Margaret Jean McCrum, Peter Michael Matters, Anthony James Pattinson, Paul Francis Rein, Claude Joseph Rigney, Anthony Patrick Staunton, Pamela Ann Walker.

Tea Cups for Supper at the University.—Councillor Wright referred to the necessity for having a proper supply of tea cups and saucers for use when meetings are held at the University.

It was decided that the Executive should get quotations for the supply of 1 gross of cups and saucers.

Prescribing by Dentists of Restricted and Dangerous Drugs.—A Councillor referred to the practice of dentists ordering restricted drugs and dangerous drugs and the prescribing of restricted drugs.

Reference was made to the Guild Guide to the Poisons Schedules (Wright & Dash) in connection with this matter and the topic was discussed.

Poisoning With Kerosene.—Mr. Winterton said the winter was now upon us and the use of kerosene for heating, etc., would increase. It would be desirable to issue to the TV stations and the radio stations advice as to warnings which should be given in relation to leaving kerosene about in bottles where toddlers could accidentally drink it. Warning should be given by the TV and radio stations.

The meeting terminated at 10 p.m.

Commonwealth News

PERSONAL and GENERAL

ROYAL AUSTRALIAN ARMY MEDICAL CORPS (PHARMACEUTICAL)

The Commonwealth Gazette dated April 23, carries the announcement that the provisional rank of **Lieutenant E. A. Hiddle** has been confirmed. Lt. Hiddle has been transferred to the Reserve of Officers, R.A.A.M.C. (Pharmaceutical) Southern Command, February, 17.

The Gazette dated April 30, announced that **Lieutenant E. Small** had been transferred to the Reserve of Officers, R.A.A.M.C. (Pharmaceutical), Eastern Command, on February 10, and that **John Lindsay Perkins** was appointed to be Lieutenant (provisionally) on March 17.

QUESTIONS IN PARLIAMENT

CORTISONE

Senator Henty, on April 8, gave the following information in reply to a question asked by Senator Sandford:

The Minister for Health has now furnished the following replies:

1. Cortisone may be prescribed as a pharmaceutical benefit only for the treatment of certain specified diseases. There is not restriction on the prescribing of Cortisone otherwise than as a pharmaceutical benefit.

2. The limitation on the prescribing of Cortisone as a pharmaceutical benefit have been made in accordance with expert medical and scientific advice.

PENSIONER BENEFITS—PETITION TO PARLIAMENT

Dr. Evatt, on April 23, in the House of Representatives, presented a petition from 1000 citizens of Australia praying that the House will—

1. Give immediate consideration to the matter of increasing the rate of age, invalid and widows' pensions to at least 50 per cent. of the basic wage;

2. Amend the National Health Act to make the pensioner medical service available to all pensioners irrespective of means; and

3. Provide increased pharmaceutical benefits for pensioners.

Petition received and read.

DRUGS FOR EPILEPSY

Replying to questions asked by Mr. Ward in the House of Representatives on April 23, the Minister of Health, the Hon. Dr. Donald Cameron, gave the following answers:—

1. It is a fact that some forms of epilepsy can now be largely controlled by the use of certain drugs.

2. Diamox tablets, although used mainly as a diuretic, do have a use in the treatment of epilepsy.

3, 4 and 5. Diamox tablets are available free as a pharmaceutical benefit on the basis of twelve tablets with one repeat. However should a medical practitioner require a greater amount for the treatment of a particular condition he may, by making application to the Commonwealth Director of Health in his State, receive authority to prescribe extra repeats for the drug. He may also endorse the prescription so that the patient may obtain the total number of tablets prescribed on the one occasion

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N.S.W.: 53 Martin Place, Sydney.
(Branch Secretary, C. Carlisle.)

QUEENSLAND: Drysdale's Chambers,
4 Wickham Street, Brisbane.
(Branch Secretary, Miss D. Brighthouse.)

SOUTH AUSTRALIA: Room No. 51 (Fifth Floor), Savings
Bank Building, 25 Bank Street, Adelaide.
(Branch Secretary, O. H. Walter.)

WESTERN AUSTRALIA: C/o Technical College,
St. George's Terrace, Perth.
(Branch Secretary, F. W. Avenell.)

VICTORIA

PERSONAL and GENERAL

State News

Members in Victoria desiring publication of personal items of interest are invited to write or telephone details to the Editor (FJ 5161).

Mr. Ross H. Shannon left Melbourne on a trip to the United Kingdom on the "Fairsky" on May 1, and expects to be away for some months.

Mr. A. B. Everard has taken over from Mrs. E. Bastin the management of Mr. N. D. Myers' branch pharmacy, 304 St. George's road, Thornbury.

During Mr. H. A. Bullock's absence overseas his pharmacy at Newmarket will be managed by Mr. L. R. Cohen.

Mr. R. D. Bruce has accepted a position with Miss M. J. Dear, Elizabeth street, Melbourne.

Mr. R. D. Briggs has replaced Mr. K. G. McKenzie as manager, Cobram Pharmacy, Cobram. Mr. McKenzie has returned to Western Australia.

Mr. L. R. Cohen has been appointed manager of Mr. H. A. Bullock's pharmacy at Newmarket during his absence overseas.

Mr. W. C. Haworth, M.P., Ph.C., who represents the electorate of Isaacs in the House of Representatives, returned during the month from Nice, where he was an Australian delegate to a council meeting of the Inter-Parliamentary Union, an organisation associated with the United Nations on a parliamentary level. Altogether, 54 countries were represented at the meeting. Mr. Haworth was elected one of the vice-presidents of the union's economic committee for the coming year. This is the first time an Australian delegate has been appointed to an executive position on this body since its inception in 1888.

Mr. G. M. Batchelor, writing from Toronto, Canada, on April 27, stated that his application for registration had been approved by the Ontario College of Pharmacy and that he was the last Australian given a licence under the old reciprocal agreement, which had been terminated. From November, 1958, Mr. Batchelor was working at a pharmacy near the centre of Toronto, where he gained invaluable experience. He intends leaving for the United Kingdom on June 8. After working a short time in England he proposes to proceed to the Continent with his wife and return to Australia towards the end of the year.

MANAGERS AND RELIEVERS—MAY LIST

Reliever	Pharmacy
Abson, Miss V. M. . .	Mr. G. Heilbronn, Sunshine.
Bohn, Mr. J. G. . . .	Mr. R. M. Bailey, Malvern.
Bristow, Mr. H. J. . .	Mr. S. D. Rose, Kew.
Crawford, Mr. J. M. . .	Mr. S. F. Byrnes, Preston.
Crook, Miss J. M. . . .	Mr. D. W. F. Bourne, Coburg.
Davies, Mr. R.	Mr. D. B. Boyall, Boronia.
Digby, Mr. J. W. . . .	Mr. R. F. Dodd, Camberwell.
Everett, Mr. C. D. . .	Mr. T. P. Lane, Daylesford.
	Mr. C. L. Drury, Glen Iris.
Homburg, Miss B. . .	Mr. J. G. Downes, Beechworth.
Jacobson, Mr. B. L. . .	Mr. D. B. McGregor, Willaura.
Joseph, Mr. R. D. . .	Mr. K. F. Barrell, Creswick.
Kiers, Mr. J.	Mr. B. B. Brown, Ascot Vale.
Lakeland, Mr. J. H. . .	Mr. A. J. Galvin, Melbourne.
	Mr. F. J. M. Duffield, Bruns'k.

Reliever

Leake, Mr. G. R. . . .
Lindell, Mr. E. . . .
Macgill, Mrs. C. . . .
McPherson, Miss H. . .
Morrison, Mr. S. S. . .
O'Malley, Miss N. . . .
Pearson, Mr. D. G. . .
Pisale, Mr. A. S. . . .
Quinn, Mrs. O.
Rogers, Mr. P.
Schwartz, Mr. H. . . .
Sibel, Mr. A.
Swedosh, Mr. W. . . .
Thompson, Miss S. . .
Trathan, Mr. R. E. . .
Willis, Mr. K.
Wilson, Mr. E. J. . . .

Pharmacy

Mr. J. R. Hussey, Strathmore.
Mr. E. Harlem, Melbourne.
Mr. H. J. Savage (Miss M. J. Dear Phcy), Prahran.
Mrs. E. M. Barton, Bairnsdale.
Mr. A. H. Mansell, Glenferrie.
Mr. N. D. Myers, Thornbury.
Mr. B. L. M. Miles, East Kew.
Mr. A. H. Thom, Warragul.
Miss P. Cooney, Gardenvale.
Mr. R. L. Clarey, Melbourne.
Mr. L. Sonkin, Brunswick.
Mr. P. D. Simmonds, Ascot Vale.
Mr. H. C. Jenkin, Bentleigh.
Mr. H. A. Murray, Orbost.
Mr. E. H. Trathan, South Melb.
Clifton Pharmacy, Clifton Hill.
Mr. C. C. Waring, Warrnambool Hospital.
Mr. A. L. Hallett, Glenhuntly.

Winning, Mr. J. R. . .

BUSINESS CHANGES

Mr. D. G. Grey, Main street, Croydon, has entered into partnership with Mr. J. A. Burns, who recently returned from abroad.

Mr. B. N. Smith, Barker street, Castlemaine, has taken into partnership Mr. D. A. Bailie, who recently qualified.

Mr. J. A. Pratt and Mr. and Mrs. M. J. Whiffin have entered into a partnership, trading as Pratt's Pharmacies. Mr. Pratt will remain at Nepean Highway, Parkdale, and Mr. Whiffin will be in charge of the pharmacy purchased from Mr. W. Parkinson, Ashburton.

Mr. and Mrs. A. Rotman and Mr. L. Rotman, trading as Rotman & Co., have purchased the pharmacy of Mr. B. Markov, 103 Chapel street, Windsor. Mr. A. Rotman will manage this pharmacy.

The following pharmacies have changed hands:

Miss A. F. Olney, from Mr. F. A. Kelley, 52 Bell street, West Heidelberg.

Mr. N. J. A. Hobbs & Son, from Miss M. Rollison, Romsey and Lancefield.

NEW PHARMACIES OPENED

Mr. J. R. Griffiths, Station street, Lalor.
Mr. P. Beaumont, Lot 7, Centre road, East Oakleigh.
Mr. N. E. J. Zerbe, 347 North road, South Caulfield.
Mr. F. A. Kelley, 373 High street, Northcote.
Mr. B. H. P. McDonald, 40 Wantirna road, Ringwood.
Mr. K. K. Greenwood, 104 Herbert street, Dandenong.

VICTORIAN COLLEGE OF PHARMACY WAR MEMORIAL BUILDING FUND

The Council of the Pharmaceutical Society advises that the following contributions have been promised by manufacturers and wholesalers since the publication of the list in the April issue of this Journal:

Brought forward (from April issue) . .	£82,475 15 0
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VICTORIA—Continued

PHARMACEUTICAL SOCIETY OF VICTORIA

Discussion Group

There was a large attendance at the College of Pharmacy for the meeting of the Discussion Group held on May 13. The speaker was Mr. R. T. Bossence, who dealt with the commercial side of pharmacy. Amongst the topics covered were book-keeping, taxation and business methods generally as they affect the retail chemist. Mr. Bossence answered many questions during the course of the evening.

At the conclusion, the Chairman and President of the Group, Mr. David Lumsden, on behalf of all present, thanked Mr. Bossence for his most informative and helpful talk.

G. K. Treleaven, Secretary, Discussion Group.

[It is hoped to be able to publish in the "A.J.P." at a later date a summary of Mr. Bossence's talk.—Ed.]

OBITUARY

John Maughan

We regret to record the death of Mr. John Maughan, which occurred in April, 1959, at Mirboo North.

Mr. Maughan was one of the oldest chemists on the Register. He matriculated in 1893, and was indentured as an apprentice in April, 1894 to Mr. James Lacey of Melbourne, who was a member of the Pharmacy Board of Victoria for many years.

Mr. Maughan was registered in 1901. Prior to his retirement a few years ago, he had conducted a pharmacy at Mirboo North for many years.

STAMPS FOR BLINDED SOLDIERS

The Partially Blinded Soldiers' Association of Australia has many members who are in indigent circumstances owing to the disabilities from which they suffer due to their war caused disabilities.

In order to alleviate these circumstances the Association maintains a fund for assisting members in need. This fund is registered under the Patriotic Funds Act.

The Association is at present making a drive for used Postage Stamps or unwanted Stamp Collections to sell to assist the fund and would be grateful if any readers of the "A.J.P." could assist by collecting these used stamps and sending them to the registered office of the Association.

Parcels of stamps could be sent to the Secretary, Partially Blinded Soldiers' Association, 312 Flinders Street, Melbourne, C.1., or if a telephone message is sent to 61 2258 the parcels could be picked up.

Any donation would be gratefully appreciated.

MEDICAL SALARIES COMMITTEE APPOINTED

The Minister of Health has approved the constitution of a Medical Salaries Committee.

The composition of the Committee is—

John V. Dillon, S.M. (Chairman).
Dr. Kevin Brennan.
Dr. Vernon L. Collins.
James G. Gillespie.
Dr. John H. Lindell.
Dr. Geoffrey Newman-Morris.
Dr. George Swinburne.

The terms of reference for the Committee's consideration are:—

- (a) Salary ranges (maximum and minimum amounts within each classification) for medical officers employed in public hospitals.
- (b) Terms and conditions of service of these officers.

- (c) Such other similar matters as may be referred to the Committee by the Minister or the Hospitals and Charities Commission.

The Committee will recommend to the Minister on matters referred by him, and to the Commission on matters referred to the Committee by the Commission.

The Commission has referred the matters mentioned in paragraphs (a) and (b) to the Committee for recommendation.

As from April 1, the address of the Hospitals and Charities Commission will be I.C.I. House, 1 Nicholson Street, East Melbourne, C.2.

AMENDING MEDICAL BILL PASSED

The Amending Medical Bill introduced in the Legislative Council on March 10, was read the first time in the Assembly on April 29, and passed through all the remaining stages. It therefore becomes law, on receiving the Royal assent.

When the second reading of the Bill was resumed on May 6, Mr. Doube referred to the provision in it relating to pharmaceutical chemists. He said that the Bill proposed a number of penalties which the Pharmacy Board might impose on a registered pharmaceutical chemist. He asked: "Why is it necessary to introduce a new provision?" They had not heard of outrageous happenings in the community that would make such action necessary.

Mr. Bloomfield: "Do you not think it is reasonable to apply the most moderate penalties?"

Mr. Doube: "I am in favour of moderate penalties, but I believe in the professions of pharmacy, dentistry and medicine the penalties should be similar."

Referring to the provisions laying down the subjects of the course, Mr. Doube suggested it was not a proper function of Parliament to lay down which subjects should be taken up by a prospective chemist. He said it was not done in the case of students in medicine and dentistry, but for some reason the Government was clinging to this outmoded idea for the pharmacy course. How could Parliament determine whether a particular subject was or was not a proper subject for study? he asked.

Mr. Bloomfield replied that members could take his word on that aspect.

Mr. Doube said that the Government, which believes it knows a great deal about everything, had decided, in its wisdom, that in place of the subjects *Materia Medica*, Botany, Chemistry and Practical Chemistry, there should be substituted the subjects of Pharmacology, Chemistry, Pharmaceutical Chemistry, Pharmacognosy, Practical Pharmacy and Botany. This Parliament was not in a position to determine which subjects should be undertaken by chemists.

An examination of the Faculty of Medicine Handbook revealed that medical students were still studying *Materia Medica*.

Mr. Loxton (Pahran) commented on the provisions dealing with the pharmacy course. He said full-time education of pharmaceutical students at the College of Pharmacy or University of Melbourne was a very good thing. It was welcomed not only by chemists, but by Friendly Societies and business concerns which were providing employment and a basis of learning for apprentice chemists.

The transition period would have its difficulties. Under the proposed legislation it would be necessary for a student to attend the College for three years and then equip himself in a further period of 12 months in a pharmacy to build up 3000 hours of practical training. Under the present apprenticeship system, affecting all first year apprentices, the chemist or master had to regard time spent at the College as time worked and to pay wages accordingly.

Under the new system an apprentice might be required to attend the College full time for two years. He doubted whether the apprenticeship agreement

VICTORIA—Continued

under which he worked could be departed from. The chemist might find the apprentice being entitled to be paid in full whilst he was attending lectures. He had mentioned this matter to the Minister, who at the moment did not believe the problem existed. He was of opinion that it would exist as from 1960.

Mr. Bloomfield (Minister of Education) said there had been criticism of the Bill because in a measure the subjects in which a young intending chemist should be examined were set out differently from the way in which they were set out in the principal Bill.

The Bill had been prepared after consultation between the Minister and the Department on the one hand, and the Pharmaceutical Society and the Pharmacy Board on the other hand. It seemed to him appropriate therefore to describe the subjects in the terminology used in those circles.

The honorable member for Prahran raised a difficulty which sprang from circumstances that it is provided that chemist's apprentices who have to enter into indentures shall do a minimum amount of study before they finally qualify.

Some members were concerned that because employers feared they may have to pay wages while an apprentice was being instructed at the College, they would be reluctant to take apprentices. He admitted that there appeared to be considerable logic in that contention. But if they recalled the powers of the Apprenticeship Commission and its wages-fixing jurisdiction, and the provision made for either party to apply to the Commission if difficulties arose, it would be realised that in practice wages would be adjusted in accordance with the common sense of the requirements of the apprentices.

Mr. Bloomfield said the point raised appeared to him to be sufficiently substantial to warrant an assurance that the Minister of Health would look into that aspect. He would refer it to the Minister, so that he might look into it before the next session period.

Mr. Doube said they were pleased to hear the Minister's explanation why the subject of *Materia Medica* had been withdrawn. However, he was not at all satisfied with the explanation given because, after all, the chemist dispensed only what the medical practitioner ordered.

VICTORIAN COLLEGE OF PHARMACY

The New Course

(From a statement authorised jointly by the Council of the Pharmaceutical Society of Victoria and the Pharmacy Board of Victoria for the information of chemists, students and prospective students.)

Amendments to the Pharmacy Regulations in 1958 fixed the Matriculation examination as the standard for entrance to the Pharmacy Course as from January 1, 1960. Persons who qualified under the old regulations (five specified school Leaving subjects) prior to December 31, 1959, remain eligible for a period of three years, but are not likely to be selected if a sufficient number of applicants with Matriculation standard apply.

The Medical Act 1958—passed in May, 1959—alters substantially the course of training for qualification as a pharmaceutical chemist. Major changes in time-tableing and in the subjects of the course have been decided upon by the Council of the College to coincide with the new legislation and the transfer of the College to the new building in Royal Parade, Parkville, in 1960.

Apprenticeship

Apprenticeship indentures will not be accepted for registration after the end of the year 1959.

In lieu of apprenticeship a prescribed course of 3000 hours of practical training under a pharmaceutical

chemist in premises approved by the Pharmacy Board will be required.

Conditions under which this practical training will be undertaken, and details concerning the times and places at which it will be done, will be set out in regulations yet to be made. It is probable that a standard form of agreement between master and student will be drawn up.

Conditions to be observed by pharmacists seeking approval to accept students for practical training will be stated in the Regulations.

Apprentices serving under Articles of Apprenticeship entered into before December 31, 1959, will continue to do so. Their rights are preserved under the new legislation. Problems relating to allowances of time for attending lectures under the new programme, payment of wages, etc., remain to be settled and are being actively discussed.

The Academic Course

The academic course at the College of Pharmacy will consist of three full-time years, some modifications being made to meet the requirements of the transition period, i.e., the period during which students who commenced under the old system will finish off their course after the introduction of the new programme for new students.

Details of the new three-year courses are:—

First Year Course: Physics, Chemistry, Biology, Pharmaceutics I (to be developed to standard of Science I or the Pre-Medical year).

Second Year Course: (Third week in March to end of October)—Pharmaceutics II (including Microbiology), Pharmacognosy, Modern *Materia Medica*, Physiology.

Third Year Course: (April to November)—Pharmaceutics III, Pharmaceutical Chemistry II, Modern *Materia Medica* II (including Pharmacognosy), Pharmaceutical Administration and Organisation (including Commercial and Forensic Pharmacy).

The Four Year of the course will be devoted entirely to practical training.

When the academic course has been completed and 3000 hours of practical training satisfactorily carried out, students will present themselves for the Final Qualifying Examination (Part B) which will be conducted by the Pharmacy Board and will comprise a practical dispensing examination and oral examination and an examination in Forensic Pharmacy.

Students entering on the course from 1960 onwards will undertake three years of academic training in the College as outlined. In the Fourth Year practical training will be done. Some practical training may be done during the course and prior to completion of the academic studies.

Continuation of the course by persons now serving as apprentices under apprenticeship indentures: The tentative programme for students already enrolled is as follows:

First Year Students, 1959 (Metropolitan): Students enrolled in the First Year Course in 1959 will attend a part-time course in Second Year until the end of 1960. They will attend the College on four half days each week and continue as part-time students serving a normal apprenticeship.

The course will commence on approximately March 21, and continue until the end of October.

They will take part-time courses in 1961 and 1962, based on time-tables approximating those at present operating for third and fourth year students.

At the end of the four years and after fulfilling prescribed requirements they will proceed to the Final Examination.

Country: Country students enrolled in the First Year Correspondence Course in 1959 will transfer to Melbourne to attend the Second Year lectures in 1960. Their indentures of apprenticeship will be transferred to a metropolitan pharmacy or dispensary and they will undertake the same course in 1960, 1961 and 1962

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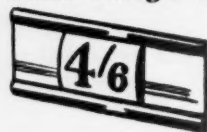
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VICTORIA—Continued

as the metropolitan apprentices. There will be no Correspondence Course in 1960.

Second Year Students, 1959: Students enrolled for the Second Year lectures, or Second Year Correspondence Course in 1959, will undertake a part-time course in 1960 and 1961, similar to those now operating for Third and Fourth Year students. After completing their College course and fulfilling other prescribed requirements, they will proceed to the Final Examination. Country students will transfer their apprenticeship to a metropolitan pharmacy.

Third Year Students, 1959: This group will complete academic work in 1960. They will do a course approximating the present part-time course of one full day and two half days. Their examination will fall in November. They will continue to serve a normal apprenticeship.

The work of this year commences in March and the Final Examination will be taken in November.

ADDITIONS TO THE REGISTER OF PROPRIETARY MEDICINES

The following additions to the Register of Proprietary Medicines were published in the Government Gazette 13/5/59:—

Distinctive Name of Proprietary Medicine	Serial Number	Date of Registration
Abbecillin-VK Filmtab	7739	6.5.59
Abbecillin-V Oral Suspension	7828	6.5.59
Achromycin Intramuscular	7923	6.5.59
A.H.T. Tablets	7724	6.5.59
Alox Tablets	7762	6.5.59
Amal Tablets	7763	6.5.59
Ambutal Suspension	7902	6.5.59
Antacid Powder	7931	6.5.59
A.P. Eye Drops	7712	6.5.59
Asmadrene Asthma Tablets	7733	6.5.59
Aspirin Aluminium Dulcet	7920	6.5.59
Aspisol Tablets	7747	6.5.59
Ast-Hay Tablets	7852	6.5.59
Atomadrene	7721	6.5.59
Aureomycin Hydrochloride Nasal	7928	6.5.59
Baqual Tablets	7764	6.5.59
Barbeph Tablets	7748	6.5.59
B.B. Cough Mixture	7926	6.5.59
B.B. Ointment	7925	6.5.59
B-Complex Tablets	7838	6.5.59
Bellergal Retard Tablets	7956	6.5.59
Bellevue Lax Powder	7725	6.5.59
Bellevue Muscle Eze	7726	6.5.59
Betamin Tablets	7765	6.5.59
Bicillin Tablets	7903	6.5.59
Bio Meal	7940	6.5.59
Calciovit per Bambini	7879	6.5.59
Calcipas Cachets	7839	6.5.59
Calcipas Tablets	7749	6.5.59
Calcipen Leo Tablets	7697	6.5.59
Calcium B-Pas with Andrazide	7832	6.5.59
Calcium Gluconate Tablets	7750	6.5.59
Callifugo Erba	7880	6.5.59
Calma-Tiv	7947	6.5.59
Cardrase Tablets	7703	6.5.59
Celontin Kapseals	7950	6.5.59
Cetamin Tablets	7766	6.5.59
Cetavlon Concentrate 40 per cent.	7848	6.5.59
Chesties	7813	6.5.59
Codelsol Nasal Spray	7867	6.5.59
Codelsol Topical Lotion	7868	6.5.59
Consol	7825	6.5.59
Copain Tablets	7704	6.5.59
Corlan Pellets	7888	6.5.59
Cortisone Tablets	7806	6.5.59
Coryzal Anti-Congestion Nasal Drops	7793	6.5.59

Distinctive Name of Proprietary Medicine

Distinctive Name of Proprietary Medicine	Serial Number	Date of Registration
Cothera	7771	6.5.59
Cybal Tablets	7751	6.5.59
Daquin Tablets	7794	6.5.59
Dartalan Tablets 5 mg.	7727	6.5.59
Dartalan Tablets 10 mg.	7728	6.5.59
Decadron Tablets	7870	6.5.59
Deep-Breth	7856	6.5.59
Delta Cortil Tablets	7915	6.5.59
Deltasolone Tablets	7807	6.5.59
Deltasone Tablets	7808	6.5.59
De Maria's Callifugo	7877	6.5.59
De Maria's Sciroppo Piperazina	7878	6.5.59
Demazin Syrup	7955	6.5.59
Dermot's Improved Cough Linctus	7939	6.5.59
Deronil Tablets	7821	6.5.59
Dexamine Tablets	7767	6.5.59
Diagnol Viscous	7738	6.5.59
Dickins Nozine Nasal Drops	7824	6.5.59
Dickins Slumba Tablets	7911	6.5.59
Digolan Tablets	7768	6.5.59
Dilcoron Tablets, Winthrop	7862	6.5.59
Ditoin Tablets	7769	6.5.59
Doze Sleeping Tablets	7802	6.5.59
Dr. Niblett's Sedative	7798	6.5.59
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Ef-Cortelan Intravenous Injection	7890	6.5.59
Ef-Cortelan Skin Ointment 0.5 per cent.	7891	6.5.59
Ef-Cortelan with Neomycin Eye Drops, 1.0 per cent.	7892	6.5.59
Ef-Cortelan with Neomycin Eye Ointment 1.0 per cent.	7893	6.5.59
Ef-Cortelan with Neomycin Intrarticular Injection	7894	6.5.59
Ef-Cortelan with Neomycin Skin Lotion, 1 per cent.	7895	6.5.59
Ef-Cortelan with Neomycin Skin Ointment, 1 per cent.	7896	6.5.59
Entodon Ampoules	7826	6.5.59
Ephedrine Sulphate Tablets	7752	6.5.59
Episol Cream	7884	6.5.59
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Evitine Tablets	7770	6.5.59
Farcil Gewo Ampoules	7936	6.5.59
Farcil Gewo Capsules	7937	6.5.59
Femerital Tablets	7946	6.5.59
Feramal Tablets 200 mg.	7900	6.5.59
Ferronat Tablets	7753	6.5.59
Fixit Corn and Wart Remover	7922	6.5.59
Folvron Tablets	7927	6.5.59
Fort-E-Plex Tablets	7761	6.5.59
Franklins Cough Linctus with Pholcodine	7913	6.5.59
Frenantol Tablets	7851	6.5.59
Gantrisin Paediatric Tablets	7904	6.5.59
Gantrisin Syrup	7957	6.5.59
Gastrene Stomach Powder with Peppermint	7883	6.5.59
Gerilets	7898	6.5.59
Gitaxin Tablets	7719	6.5.59
Golden Eye Ointment	7882	6.5.59
Gro-Tone	7815	6.5.59
Haema Ointment	7844	6.5.59
Haema Powder	7845	6.5.59
Hangover Special	7795	6.5.59
Hay Tablets	7853	6.5.59
Hay-Ma Tablets	7857	6.5.59
Hibitane Digluconate 20 per cent.	7843	6.5.59
Hilyard's Hay-As Tablets	7854	6.5.59
Hopcroft's 22	7805	6.5.59
Hydrocortisone Acetate Tablets	7754	6.5.59

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Ilidar Ampoules	7952	6.5.59
Ilidar Tablets	7953	6.5.59
Ilotycin Tablets, Lilly	7934	6.5.59
Inhalant Capsules	7734	6.5.59
Interlude Tablets	7803	6.5.59
Junior S.T.C. Stop that Cough		
Linctus	7742	6.5.59
Kanasig	7935	6.5.59
Kavitine Tablets	7809	6.5.59
Kidney Tablets	7948	6.5.59
Kiesow's Essence	7737	6.5.59
Landy's Skin Ointment	7930	6.5.59
Lapudrine Tablets	7942	6.5.59
Larylgan	7866	6.5.59
Lederkyn Acetyl Pediatric Suspension	7943	6.5.59
Liver Pills	7735	6.5.59
Lusticide Blue	7827	6.5.59
MacDougall's Vitamin Compound Tablets	7722	6.5.59
Magnesia Santos Effervescent	7702	6.5.59
Mal-Vites (Multivitamin Fort Tablets)	7912	6.5.59
Marsilid Tablets 25 mg.	7917	6.5.59
M.A.T. Tablets	7858	6.5.59
Mephosol	7804	6.5.59
Mepogen Tablets	7840	6.5.59
Metestine Tablets	7847	6.5.59
Methamine Tablets	7772	6.5.59
Meticortelone Soluble	7873	6.5.59
Miles' Pink Mixture for Pain	7929	6.5.59
Moone's Emerald Oil	7871	6.5.59
Moore's White Liniment	7714	6.5.59
Morton's Phentodex Tablets	7736	6.5.59
Multi-Fort Vitamin Tablets	7949	6.5.59
Myamine Sulphate Tablets	7941	6.5.59
Mylosed Tablets	7841	6.5.59
Myophane Tablets	7785	6.5.59
Mytelase Tablets, 10 mg., Winthrop	7745	6.5.59
Mytelase Tablets, 25 mg., Winthrop	7746	6.5.59
Narcoids	7715	6.5.59
Neo-Morrhul Cream (N.M.C.)	7708	6.5.59
Neomycin Ointment	7698	6.5.59
Neosporin Antibiotic Lotion	7905	6.5.59
Neosporin Topical Antibiotic Powder	7906	6.5.59
Neotracin Antibiotic Spray	7822	6.5.59
Neotracin Endodontic	7696	6.5.59
Neotracin Otic Drops	7700	6.5.59
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Neuro Tonic	7846	6.5.59
No-Doz Awakeners	7723	6.5.59
Noreth Airon (Cadmium)	7901	6.5.59
Noreth Tablets Aphosa	7910	6.5.59
Norlutin Tablets	7711	6.5.59
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Nyal Cough Linctus	7916	6.5.59
Nyal Medicated Throat Lozenges	7837	6.5.59
Obron	7850	6.5.59
Optik	7959	6.5.59
Otamidyl Ear Drops	7887	6.5.59
Painease Powderettes	7908	6.5.59
Panmycin Capsules	7951	6.5.59
Papaverine Tablets	7773	6.5.59
Para-Aminosalicylic Acid Tablets	7774	6.5.59
Pathilon Tablets	7919	6.5.59
Paxyl	7701	6.5.59
Penta-Vite Concentrate	7944	6.5.59
Penta-Vite Infant Formula	7945	6.5.59
Pentonal Compound Tablets	7775	6.5.59
Pentonal Tablets	7776	6.5.59

Distinctive Name of Proprietary Medicine	Serial Number	Date of Registration
Perdilatal Forte	7741	6.5.59
Perolysen Tablets	7709	6.5.59
Perrin's Vita-Calcium Tablets	7706	6.5.59
Petiscol Injections	7777	6.5.59
Phiko Multivitamin Mineral Tonic Tablets	7823	6.5.59
Pimal Tablets	7778	6.5.59
Planidets	7932	6.5.59
Polaramine Tablets	7707	6.5.59
Prednelan Tablets	7897	6.5.59
Premarin with Meproamate (PMB 200)	7933	6.5.59
Preparation H. Suppositories	7718	6.5.59
Presuren	7796	6.5.59
Procaine Injections	7779	6.5.59
Proctosedyl Ointment	7729	6.5.59
Promitone Tablets	7780	6.5.59
Protamyl Tablets	7710	6.5.59
Pyroxin Tablets	7810	6.5.59
Radian B	7799	6.5.59
Radian Massage Cream	7800	6.5.59
Rasprin Junior	7699	6.5.59
Reserpine Tablets	7781	6.5.59
Rhu Pills	7720	6.5.59
Roberts Mallow and Slippery Elm Soothing Ointment	7814	6.5.59
Rumadol	7899	6.5.59
Salicylamide Tablets	7811	6.5.59
Sandosten + Calcium — Sandoz Syrup	7875	6.5.59
Sandosten + Nasal Spray with Calcium-Sandoz and Ephedrine	7874	6.5.59
Saponine	7865	6.5.59
Scheriproct Ointment	7759	6.5.59
Scheriproct Suppositories	7760	6.5.59
Scherisolon Ointment	7829	6.5.59
Seboderma	7938	6.5.59
Sigma Pastilles	7921	6.5.59
Sixavite Tablets	7812	6.5.59
Soventol Jelly	7757	6.5.59
Soventol Tablets	7758	6.5.59
Sodium Salicylate Tablets	7816	6.5.59
Solprin-Soluble Aspirin Tablets B.P.	7849	6.5.59
S.T.C. Stop that Cough Linctus	7743	6.5.59
Streptotriad Granules	7914	6.5.59
Streptotriad Tablets	7909	6.5.59
Sulphacompound Tres. Tablets	7817	6.5.59
Sulphalyl Tablets	7782	6.5.59
Sulphamerazine Tablets	7818	6.5.59
Sulphathiazol Tablets	7819	6.5.59
Sunburn Relief Ointment	7835	6.5.59
Supronal Tablets	7717	6.5.59
Synermycin Suspension	7744	6.5.59
Teething Powders	7716	6.5.59
Tenormal Tablets	7918	6.5.59
Testine Injections	7820	6.5.59
Theobromine Compound Tablets	7783	6.5.59
Theobromine Sodi Salicylate Tablets	7784	6.5.59
Thomas' Pain and Nerve Tablets	7705	6.5.59
Three Syrups	7869	6.5.59
Thru	7797	6.5.59
Tonical Fort	7872	6.5.59
Tots Tablets	7861	6.5.59
Towle's 3X Pills	7954	6.5.59
Tral Filmtab	7740	6.5.59
Tumeze	7859	6.5.59
Tums Antacid Tablets	7731	6.5.59
Ung. Salol Durum 5 per cent.	7730	6.5.59
Van's Eye Drops	7863	6.5.59
Vermolina	7881	6.5.59
Vicks Vitamin C Cough Drops	7836	6.5.59
Vita-Calcium	7713	6.5.59
Vita-Drops	7801	6.5.59
Vitamin Tonic	7864	6.5.59
Vita-Plex	7924	6.5.59

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VICTORIA—Continued

Distinctive Name of Proprietary Medicine	Serial Number	Date of Registration
Vitoran Adult	7860	6.5.59
Walco Eucalyptus and Menthol Gums	7786	6.5.59
Walco Irish Moss Gums	7787	6.5.59
Walco L.L.C. Throat Jubes	7788	6.5.59
Walco Quick-Eze Antacid Tablets	7732	6.5.59
Walco Throat Jubes Black Currant and Glycerine	7789	6.5.59
Walco Throat Jubes—Glycerine Honey, and Lemon	7790	6.5.59
Walco Throat Jubes—Irish Moss	7791	6.5.59
Walco Throat Jubes—Menthol and Eucalyptus	7792	6.5.59
Waltons-Sears Junior Multi-Kaps	7833	6.5.59
Waltons-Sears Multi-Kaps	7834	6.5.59
Ward's Vita-Plus	7958	6.5.59
Wood's H.F. Tablets	7855	6.5.59

PHARMACY BOARD

Monthly Meeting

The Pharmacy Board of Victoria met at "Guild House," 18 St. Francis street, Melbourne, on May 13, at 10 a.m.

Present.—Mr. H. A. Braithwaite (in the chair), Messrs. S. J. Baird, A. W. Callister, K. Hartley, W. R. Iliffe, W. Wishart, the Registrar and Deputy Registrar.

Correspondence.—To storekeepers in a country town, advising general dealers' licences would not be renewed after 1959, as a chemist was now in business in the town.

From a South African pharmaceutical chemist, enquiring re reciprocity. Position outlined.

To an enquirer from Great Britain, advising that the certificate of the Apothecaries Hall was not accepted for registration by the Board.

From a New South Wales chemist, asking for details of legislation in Victoria which prohibited dispensing by unqualified persons in hospitals. Relevant extracts from the Hospitals and Charities Act and the Pharmacy Regulations quoted.

From Inspector J. E. DeLany, thanking the Board for arranging for Mr. H. A. Braithwaite to give a lecture at the Detective Training School on May 21 on the Poisons and Dangerous Drugs Regulations.

To a country chemist, seeking explanation concerning report that his pharmacy had been left without qualified supervision. A reply was received tendering an explanation and giving an assurance that the requirements of the Medical Act Part III would be fully observed in the future.

To several chemists, seeking assurances that greater care would be taken in carrying out detailed requirements of the Dangerous Drugs and Poisons Regulations.

To a chemist, commending his action in drawing attention to irregularities in connection with the issue of a prescription for a Specified Drug. The Chairman said that as a result of the information received action had been taken by the Drug Bureau.

To a distributing firm, drawing attention to the provisions of the Postal Regulations requiring registration of packages containing poisons when sent by post.

To Pharmacy Boards in all States, forwarding copies of the consolidated Poisons and Medical Act 1958.

To a country chemist, pointing out that premises could not be used as a pharmacy unless a registered person

was in charge at all times. A reply was received indicating that poisons, etc., had been removed and the branch shop would not be conducted as a pharmacy.

To a pharmaceutical chemist, pointing out that the Pharmacy Regulations provided, in a pharmacy conducted in a department store, no medicines can be legally dispensed or compounded unless the section in which the dispensing is done is entirely isolated and shut off from other parts of the store.

From two chemists, forwarding Statutory Declarations concerning the accidental loss of small quantities of Dangerous Drugs.

Formal Business.—The following formal business was transacted.

Applications For Registration Granted: Lynette Margaret English, Richard Francis Raymond Parsons, Daphne Alice Lammal Opie, William Leonard Prigg (all passed Final Examination, Victoria); Margaret June Adams (ex N.Zld.), John Robert Winning (ex N.S.W.), Vicky Lazare (ex S.A.).

Names Restored to Pharmaceutical Register: Ronald Herbert Beckinsale, Paula Prudence Commons (Mrs. Carberry), Jean Melville DeRavin (Mrs. L. S. Upstill), Marion Helga Eger (Mrs. Morton), Eileen Hilda Lovick (Mrs. E. Crockett), John Francis White, Frederick Charles Witten, Catherine Marjorie Lucy Wolfe (Mrs. M. Annand), Noel Edward Jackson Zerbe.

Erasure of Names: Thomas William Campbell (deceased), John Maughan (deceased).

Certificates of Identity Issued: 10.

Managers and Relievers Notified: 98.

New Pharmacies Opened: 11.

Pharmacies Transferred: 8.

Opium Permits: 19.

Apprenticeship Indentures Registered: 66.

Apprenticeship Transferred: 7.

Apprenticeship Suspension: 1.

Certificates of Exemption Issued: 64.

Permits to Purchase Cyanide: 4.

Licence as General Dealer in Poisons Issued: 1.

Licences to Sell Poisonous Substances Issued: 39.

Authorisation to Have Possession of Dangerous Drugs at Hospitals: 4.

Report re Poisonings: Barbiturate, 4 fatal, 1 non-fatal; Chloral Hydrate, 1 fatal; Morphia, Strychnine and Atropin, 1 fatal; Sodium Hypo-Chloride, 1 fatal; Nicotine Sulphate, 1 fatal.

Amending Medical Bill.—The Chairman reported that a meeting with representatives of the Council of the Society and the State Branch Committee of the Guild had been held. Details of the amending Act which had now been passed were put before the meeting, together with an outline of the proposed new curriculum.

A concise statement as to the programme of implementation was being prepared and as soon as one or two important matters were settled this statement would be published and sent to all chemists, students and prospective students.

It would be necessary, also, for regulations concerning conditions under which practical training under the new scheme would be carried out to be drawn up and priority would be given to this task.

Amending Pharmacy Regulations.—A revised draft prepared in accordance with the Board's directions had been drawn up and was tabled. This was approved and it was resolved that the amendments be signed, that the seal of the Board be attached, and that they be forwarded to the Department of Health for approval by the Governor in Council.



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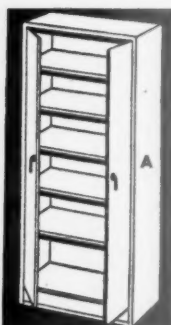
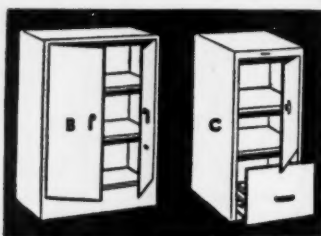
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VICTORIA—Continued

Conference of Pharmacy Boards.—Consideration was given to the various items in the agenda for the Conference of Pharmacy Boards to be held in Adelaide later in the month, and the Board's views noted by delegates who would be attending the Conference.

Report of Committee on Inflammable Liquids and Gases.—Reports concerning two meetings which he attended as a representative of the Board were tabled by Mr. Borowski.

Mr. Borowski reported that at the first of these meetings a plan had been put forward for the general procedure of handling and labelling volatile anaesthetics and solvents.

The second meeting had taken this plan further in dealing with individual substances and it was proposed that this Committee would meet regularly until suitable regulations were drafted for submission to the Advisory Committee of fire, explosion and electrical hazards.

Specified Drugs in Hospitals.—A communication from a hospital chemist was considered, and it was resolved that suggestions made by him concerning the control of Specified Drugs should be taken up with the appropriate departmental officials in conference.

Uniform Schedules.—A progress report on the work of the Committee dealing with uniform poisons schedules was presented by the Chairman.

Prosecutions.—The Chairman said that Inspectors' reports for the month had been dealt with by a sub-committee of the Board on the previous day. Routine matters had been attended to and the following were referred to the full Board for action:—

A report drawing attention to serious deficiencies in regard to Dangerous Drugs records, etc., at a country pharmacy was considered, and it was resolved that legal proceedings be taken against the chemist concerned.

Sale of Specified Drugs to an Inspector of the Board by an unqualified person during the absence of a veterinary surgeon who was the proprietor of the business was reported, and the Board directed that legal proceedings be instituted for the alleged offence.

A report concerning the unsatisfactory state of a pharmacy was considered and it was resolved that an appropriate letter be sent to the person concerned.

A country chemist who had not been in attendance at his pharmacy when visited by an Inspector replied to a letter from the Board, indicating that he would on all future occasions lock the pharmacy if he was absent on emergency business, and no qualified person was available.

The Board accepted the undertaking and resolved that no further action be taken.

Reference was made to a pharmacy in which was installed a glass-fronted Dangerous Drugs cupboard. The Board considered such a cupboard unsuitable and instructed that this view be communicated to the person concerned.

A summary was submitted by Inspector Hobley showing in tabulated form the result of his first three months' work amongst stores in connection with the sale of poisons and poisonous substances. The Board expressed appreciation of the manner in which the work had been undertaken and decided that Mr. Hobley's appointment be extended.

Final Examination.—Arrangements for the conduct of the practical and oral examination were considered and agreed upon.

Financial.—The Honorary Treasurer submitted the monthly financial statement and accounts totalling £3256/13/5 were passed for payment.

The meeting then adjourned.

PHARMACEUTICAL SOCIETY

Council Meeting

The Council of the Pharmaceutical Society of Victoria met at 18 St. Francis street, Melbourne, on May 14, at 8.20 p.m.

Present.—Mr. E. Scott, President, in the chair, Messrs. S. J. Baird, A. G. Davis, N. C. McLeod, K. Ramsay, G. H. Williams, and by invitation, Messrs. H. A. Braithwaite, A. W. Callister, A. T. S. Sissons and K. G. Attiwill, together with the Secretary and Assistant Secretary.

Welcome Home to President.—Mr. Davis, who acted as President during Mr. Scott's absence in U.S.A. and England, welcomed Mr. Scott back to the Council. He said the members were very pleased to have him with them once again in the role of President, and were delighted to see him looking so well.

Mr. Scott thanked Mr. Davis for his words of welcome and for acting as Chairman of the Council during his absence. He wished to thank the Council members also for the help they had given him through the past years.

Report.—Mr. Scott then presented to the meeting a report of his mission to U.S.A. and England in company with Messrs. N. C. Manning and K. G. Attiwill, in connection with the Victorian College of Pharmacy War Memorial Building.

He reported that the programme had been exceedingly strenuous and the result so far as it could be judged at this stage, satisfactory.

P.A.A. Conference.—It was resolved that the President be nominated as voting delegate and Mr. S. J. Baird as alternate voting delegate on behalf of the Society at the P.A.A. meeting to be held in Adelaide.

Presentation of Diplomas.—The President said he had been informed that arrangements were well in hand for the function which would be held in the Public Lecture Theatre, Arts Building, University of Melbourne, on June 22, when Professor E. S. Hills, Professor of Geology and Mineralogy, would be the guest speaker.

Annual Church Services.—The President said these would be held on June 21 at St. Paul's Cathedral and St. Patrick's Cathedral.

It was resolved that Mr. N. C. Manning, President of the Pharmacy Board, and Mr. J. R. Oxley, a member of the Council, be invited to read the lessons at the service at St. Paul's.

New Curriculum.—Mr. Callister reported on the discussion he had had with the Dean of the College concerning details of the new curriculum and plans for the change over to the new courses.

A draft of a statement prepared by the Secretary for circulation to chemists, present students and prospective students was approved, subject to amendment in accordance with the decisions of the meeting.

The meeting terminated at 10 p.m.

THE P.D.L.

Directors' Meeting

The 411th meeting of the Directors of Pharmaceutical Defence Limited was held at 18 St. Francis street, Melbourne, on May 20, at 9.52 a.m.

Present.—Mr. E. W. Braithwaite (in the Chair), Messrs. I. H. Barnes, W. J. Cornell, N. C. Cossar, D. A. Lees, E. A. O. Moore, J. W. Pollock, and the Secretary.

Talks at Guild District Meetings.—Mr. Moore said he had telephoned Mr. Bedford after the last meeting. Mr. Bedford told him he was very happy with the address, and promised he would make some comment on it at the next meeting of the Guild State Branch Committee.

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VICTORIA—Continued

The Chairman said he had arranged with Mr. Dom Crowley that he would give a talk at their next meeting. Mr. Crowley would discuss this suggestion with Mr. Norman Keith, and an effort would be made to combine two districts when the talk was given.

Correspondence.—Formal correspondence was tabled, and the following were amongst the letters dealt with:

From the family of the late T. D. H. Allan, of Western Australia, acknowledging with thanks the message of sympathy from the P.D.L. Board.

To the widow of a country member, forwarding sympathy and offer of assistance following the death of her husband.

Inquiries for copies of the booklet "On Going Into Business" continued to reach the office, and copies had been sent accordingly.

From the Town Clerk, City of Melbourne, seeking nomination for the City Voters' Roll. It was resolved that the name of Mr. E. W. Braithwaite be forwarded.

The Pharmaceutical Association of Australia advised that each affiliated organisation should appoint an official voting delegate, who should be furnished with formal credentials to be presented at the opening session of the conference.—It was resolved that the Chairman, Mr. E. W. Braithwaite, be the voting delegate on behalf of P.D.L.

To the Mutual Life and Citizens' Life Assurance Co. Ltd., forwarding (a) details of annual and half-yearly premiums falling due during the quarter July-September, 1959, and (b) list of policies on which premiums at this date totalled £2 or less per month. The acknowledgment from the Agency Manager for Victoria stated that these lists would be of great assistance in the re-canvassing of P.D.L. members when the new agreement had been completed.

To the Mutual Life and Citizens' Assurance Co. Ltd., suggesting that if possible the P.D.L. be advised at least three months in advance concerning policies about to enter upon the last year of their currency. The reason for this was that P.D.L. had not a record of the date of maturity of most of the policies issued, and some embarrassment was caused when a notice was sent for a policy that had matured or was about to mature in the course of a few months. The Secretary said he had not received a reply to this communication, but the new Business Manager had telephoned to say that the gathering and furnishing of this information "would prove difficult." The Chairman suggested that a note be included on all Group Assurance notices to the effect that as the dates of maturity of policies were not held by the P.D.L. office, the notice might cover a greater period than was necessary in the event of the policy approaching maturity, and if that was so the policyholder might be asked to telephone or write to the office. The Secretary said that would help to minimise any misunderstanding under this heading.

A tabulation from "The Australian Insurance and Banking Record," of April, 1959, showing the main provisions of the Workers' Compensation Acts and Ordinances in force throughout the Commonwealth, was tabled.

The Secretary of the Queensland Branch wrote seeking information in regard to the C.I. covers available for qualified relievers. This advice was conveyed in the Secretary's letter of May 1.

The Chairman reported that he had received a very interesting and informative letter from Mr. Norman V. Orr touching upon his experiences abroad to date. Mr. Orr had visited the offices of the Chemists' Defence Association in London, where he had been looked after very well. Mr. Orr stated that he had a lot of information which he would bring back with him.

The correspondence was received.

VICTORIA—Continued

New Members Elected.—Miss Anne F. Olney, West Heidelberg; Frank H. Bedford, Elsternwick; Kevin K. Greenwood, Dandenong; John L. Hadden, Wodonga; George Huppert, St. Kilda; Ian R. Keelan, Spotswood; Robert H. Macaulay, East Preston; Bruce H. P. McDonald, Ringwood; Kevin Nankervis, Box Hill South; William L. Porz, Moorabbin; Archibald H. Thom, Waragul.

Journal Report.—Mr. Cossar covered briefly the main items of business dealt with at the meeting of the Committee of Management of the Journal during the month.

Legal Advice.—Two queries regarding leases had been handled since the April meeting.

Claims.—No new developments were reported.

Adelaide Conference Agenda.—Consideration was then given to the agenda for the meeting of P.D.L. representatives to be held at Adelaide during the conference of the Pharmaceutical Association of Australia. This meeting of P.D.L. representatives would be held at Walsh's Oriental Hotel, Rundle street, on May 26, at 4 p.m. The various items on the agenda were discussed and the Chairman noted the wishes of the meeting.

M.L.C. Agreement.—Copies of the letter dated April 27, 1959, from the Manager of the M.L.C. (Mr. R. P. McKenna) had been circulated to the Directors with the notice of meeting. In this letter the M.L.C. summarised the revised terms that had been discussed with the representatives of the Directors.

After discussion, it was resolved that the terms as outlined in the letter from the Mutual Life and Citizens' Assurance Co. Ltd., dated April 27, 1959, be endorsed by the Directors as the basis for the drafting of a new agreement, such draft to be presented for discussion at the next meeting of the Directors, if possible.

Financial.—The Hon. Treasurer presented the monthly financial statement, and accounts totalling £441/7/9 were passed for payment.

Report on Federal Council Investments.—Mr. Cossar said there still remained an amount to be invested for the Special Reserve Fund Account No. 1 (Head Office) and a further sum from the Welfare Fund. He thought these transactions would be complete prior to the next meeting.

The meeting closed at 12.50 p.m.

THE GUILD

S.B.C. Meeting

The State Branch Committee of the Victorian Branch of the Guild met at 18 St. Francis Street, Melbourne, on May 5, at 8 p.m.

Present.—Mr. N. F. Keith, President (Chairman), Messrs. F. H. Bedford, K. L. C. Davies, J. W. D. Crowley, J. T. DeRavin, J. K. Gosstray, H. Marks, G. Carter, J. D. Clarke, G. W. Siebler, R. Grinlington, H. C. B. Henshall, C. M. Waters, S. M. Adams, J. F. Oaten, C. McLeod, J. Scown, A. W. Cocking, A. K. Lloyd, A. Rigg, Miss I. R. McGillivray, and the Secretary.

Executive Report.—The Executive report was adopted, subject to an amendment moved by Mr. Henshall, the amendment being to page 2, paragraph headed "Country Delegates," deleting "the various metropolitan delegates and sub-delegates approved by the State Branch Committee," and substituting therefor the words "members of the State Branch Committee."

Assistants' Guild.—The President reported that the Executive had met the Executive of this organisation on May 4.

Society, Board, Guild Meeting.—The President reported that the Guild had met representatives of the Society and the Board and drew attention to a written report on the outcome of this meeting, which had been sent to all S.B.C. members. It was resolved that further discussions be deferred until receipt of a statement from the Secretary of Labour as to the effect on the present indentures by the new curriculum.

Correspondence.—A circular on the result of a survey of pharmaceutical students was passed around the room.

P.A.A.—The Adelaide Congress agenda was discussed in detail and the voting delegate instructed according to the Committee's decision on various remits.

Mr. Keith was appointed voting delegate, on the motion of Mr. Bedford, seconded by Mr. Adams.

From Mr. N. Smith, New South Wales: Information about a monthly circular was referred to the Executive for consideration.

From Cenovis Yeast Pty. Ltd. It was decided to thank this company for its co-operation and to publish its letter in "Gilseal News."

From Cornwall, Stodart & Co. A letter regarding pharmacy partnerships was referred to the Executive for further consideration.

New Members Elected.—Messrs. A. E. J. Simmonds, J. Hartley, P. Beaumont, H. G. James, B. H. McDonald, D. W. Roberts, Misses J. Gibney, A. F. Olney.

Re-entered.—Mr. J. R. Griffiths.

Partnerships Recorded.—Mr. M. Macaulay has taken Mr. R. I. Macaulay into partnership. Mr. E. Huppert has taken Mr. G. Huppert into partnership.

Returning Officer.—Mr. Adams was elected Return-Officer for the forthcoming elections. Nominations would close on May 29.

Annual Meeting.—The date of the annual meeting was determined as August 24.

H.B.A. Committee Report.—The Chairman reported on a recent meeting between the Liaison Committee and H.B.A. This was presented in a written statement to be published.

District Remits

District No. 22.—Certain matters regarding H.B.A. were discussed and it was advised that the Guild was awaiting a reply from H.B.A.; it was stated that the S.B.C. was not in favour of a minimum of four weeks for the receipt of subscriptions.

District No. 6.—The request that the Guild Solicitor investigate the legal aspects of partnership pharmacies was noted, the chairman advising that this matter was proceeding.

District No. 4.—

Dispensing Fee, Emulsions: To the opinion that a larger fee should be approved for emulsions, it was stated that the time taken is no longer than that for water mixtures.

Dispensing Fee, Powders: The reported variation in the fees for excess quantities of powders was referred to the Pricing Committee.

Number of Lines: It was decided to refer to the Trade and Commerce Committee the large number of sizes and packs of branded lines.

H.B.A. Special Account: Enquiries regarding this matter are set out on an H.B.A. Report which will be published.

District No. 3.—A request for the supply of a better quality advertising card in lieu of the numerous banners, streamers, etc., was referred to the Merchandising and Publicity Committee.

QUEENSLAND

PERSONAL and GENERAL

State News

Members desiring publication of personal items of interest are invited to write or telephone details to the Journal Correspondent in Queensland, Miss D. Brighthouse, 'phone B 8407.

Mrs. N. M. Graham has opened a pharmacy at 381 George street, Brisbane.

Mr. L. M. Brosnan is establishing his pharmacy at Shaw road, Wavell Heights.

Mr. K. V. O'Brien has opened a pharmacy at 91 Lytton road, East Brisbane.

Weddings of interest in Pharmacy circles within recent weeks included the marriage of Miss Audrey Gilmour, of Miles, who was married to Mr. David Wilson, of Auckland, New Zealand, in St. Paul's Presbyterian Church, Brisbane, on April 18.

Two pharmacists who were married at St. Andrew's Church of England, South Brisbane, on May 9, were Mr. David Clowes, whose bride was Miss Joan Shepherd—both of Toowoomba.

To the newly-weds we extend congratulations and very best wishes for the future.

Congratulations to Mr. L. G. Godlonton who, at the Lions Conference held in Brisbane during the month, was elected one of the four District Governors. Mr. Godlonton's position is District Governor of Queensland. We wish him every success in his appointment.

A traveller by the "Fairsky" which left Brisbane during the month was Mr. W. V. Roberts, of Theodore, who is planning to spend some time overseas.

Queenslanders attending the Pharmaceutical Association Conference which is being held in Adelaide from May 25 to June 2 include Mr. and Mrs. C. A. Nichol, Mr. and Mrs. G. R. Wells, Mr. and Mrs. W. E. Martin, Mr. and Mrs. A. B. Chater, Mr. and Mrs. A. L. Hodgson, Misses E. F. Chalmers, G. Elliot, D. Brighthouse, Messrs. S. B. Watkins, J. Richardson, J. E. McCaskie.

GOLF

The Chemists' Golf Club enjoyed an outing to the Nudgee Links on May 10. The competitions resulted as follows:—

A Grade: Len Fogg.

B Grade: B. M. Benjamin.

Foursomes: Ian Brusasco and K. Bate.

Associates: Pat Brusasco.

Closest to Pin: Pat Seeney.

Putting: Ian Brusasco.

The next game will be played at Toowoomba on June 21, when it is hoped there will be a good attendance.

ROCKHAMPTON'S DISCUSSION GROUP

The second meeting of pharmacists and apprentices in Rockhampton and district was held on April 23 at the Y.W.C.A. Hall. The meeting was well attended and shows promise of good support from the local chemists.

Mr. W. J. Boreham and Mr. A. F. Sherlock are conducting a class for apprentices to help them with their correspondence course.

Office-bearers elected for the ensuing year were—

Chairman: Mr. R. H. Fitzpatrick.

Secretary: Mrs. M. J. Fraser.

Treasurer: Mr. K. Nash.

Committee: Messrs. R. A. O'Toole, W. H. Boreham and A. F. Sherlock.

Mr. A. F. Sherlock delivered an address on the amended poisons regulations; this created much discussion, the result of which being that the Committee is to prepare a list of commonly used "over the counter" lines with directions for labelling as required by the Poisons Regulations 1958, and to distribute this list to members.

The meeting concluded with the showing of a film of "The Glycosides of Digitalis and Their Effects on the Heart."

The next meeting is to be held on Thursday, June 25, when Mr. Des. Sullivan will speak on "Aspects of Overseas Pharmacy" as seen during his recent trip. This will be followed by a film on (1) Chloromycetin and (2) Phagocytosis.

We hope that all members will make an effort to attend this meeting. Any visitors in the district at that time would be welcome.

BOWLS

On April 7 a game at Dick Lewis's night green was enjoyed by 16 players. A two round competition was played. The winners were Messrs. A. Morton, G. Nolan, T. Hastings and R. Ward.

On April 12 an afternoon game was enjoyed at Gaythorne, the home club being the winners of the day. The scorers were:

	C.	G.
Gillies, Dr. Jobbins, McWatters, Waldron	28	21
Belford, Brown, Wiley, Hall	16	38
Hyslop, McDermott, Wilson, Bell	13	32
Nolan, Murphy, Thorsen, Ward	26	26
Totals	83	117

The next game was played on May 24 when a visit was paid to the Indooroopilly Club.

On May 31 the Chemists will be playing the Doctors in the Milnebrown Competition. This is three rinks a side and will be played at Toowoomba. On the morning of that day the Chemists will play the second round of the singles competition.

Tentative arrangements are now being made for the Chemists' Bowling Carnival to be held in Sydney from September 20 to 26. An invitation is extended to any country chemists interested to join the party on the visit to Sydney. For tentative bookings for accommodation, application should be made to the Secretary, Ron Ward, Moses Ward & Son, 300 Queen street, Brisbane, as soon as possible.

PHARMACEUTICAL SOCIETY

Council Meeting

The Council of the Pharmaceutical Society of Queensland met at 4 Wickham street, Brisbane, on May 14, at 8.15 p.m.

Present: Mr. G. R. Wells (President), Misses E. Chalmers and G. McD. Elliot; Messrs. J. S. D. Mellick, K. Woods, R. V. S. Martin, I. M. Young, C. G. Caswell, A. M. Grant-Taylor, A. B. Gainford, J. E. McCaskie and the Secretary.

Visitors.—Mr. Paul Speedy and Mr. Trevor Cichero from the Queensland Pharmaceutical Students' Society. The President welcomed the visitors.

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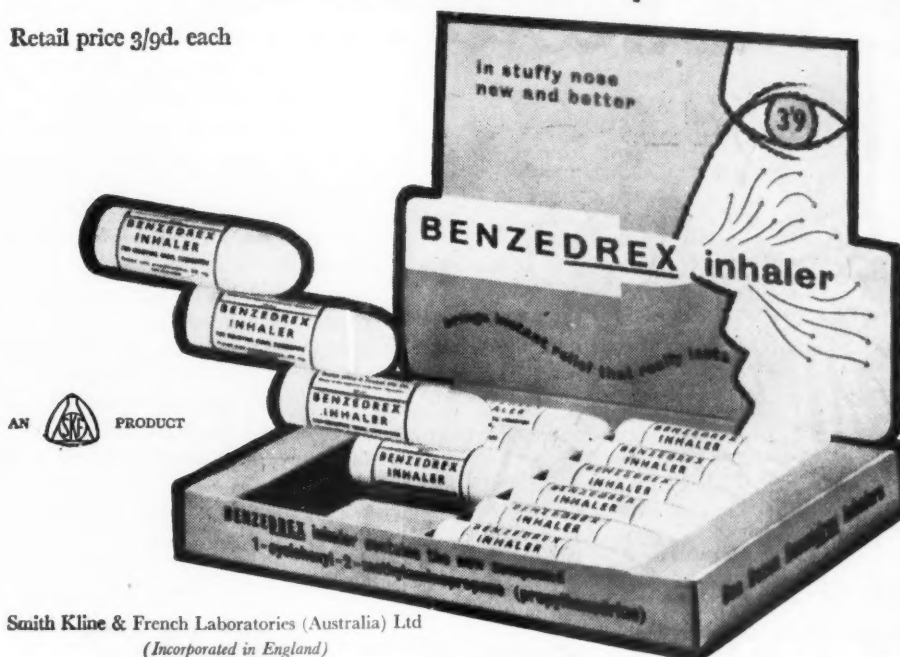
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QUEENSLAND—Continued

Students' Query.—It was decided that the Council business would be adjourned to allow the Students' Representatives to bring forward their business for Council consideration. The President then invited Mr. Speedy to bring forward students' matters requiring the Council's consideration.

After lengthy discussion, Mr. Wells said he thought quite a deal of time had been spent concerning the Students' query, and he thought if the Students' representatives reported back to their body some of the views expressed at tonight's meeting it would give them further food for thought. He assured Mr. Speedy and Mr. Cichero that the Council would be very pleased to hear from them at a later date concerning their Society's views and recommendations. Mr. Speedy and Mr. Cichero then retired from the meeting.

Centenary Dinner.—Mr. Gainford said Miss Elliot, another member of the sub-committee, had obtained quotations from various sources, and he would ask her to report thereon.

After hearing the various quotations, it was resolved that the Centenary Dinner be held at the Brisbane Golf Club on the evening of September 12, with subscription in the vicinity of £2/2/- per person.

Mr. Caswell said he was a member of the Brisbane Golf Club, and he could vouch for the attractive setting for a function such as that the Council proposed.

After discussion, it was agreed that Mr. Caswell should be co-opted to the Social Committee for the oversight of the Centenary Dinner on September 12.

Correspondence.—To Mrs. Lister, conveying the sympathy of the President and Council on the death of her husband.

To Mr. F. H. Phillips, conveying the Council's regret at the unfortunate accident which he experienced and hoping before very long he will be feeling strong and well again.

To a country member, re scholarships for Bachelors of Pharmacy. Thanking him for his suggestion, and advising this will be further considered when the Bachelor of Pharmacy course is inaugurated at the University.

To Burroughs Wellcome & Co. (Aust.) Ltd., Parke Davis & Co. Ltd., Sterling Drug Company and William R. Warner & Co. Pty. Ltd., conveying the Council's appreciation of the cordial welcome extended to Mr. J. S. D. Mellick when he called on them.

To Mr. R. Sutherland, Wyeth Int. Ltd., offering congratulations on his appointment as general manager of Wyeth International and extending to him best wishes in his new position.

Acknowledgments of messages of sympathy from Mrs. T. Allan, Dr. N. Behan and Mr. F. J. Behan.

From University of Queensland, advising that the Senate of the University of Queensland has approved that a Board of Studies in Pharmacy be established for the purpose of advising on matters relating to the establishment of the course in pharmacy. Requesting that a representative of the Society should be nominated to such Board of Studies. It was resolved that Mr. Mellick fill the position.

Mr. Mellick said he would like to suggest that the representative provide a full report to all meetings of the Council; this was agreed to.

From the National Association of Pharmaceutical Students of Australia: (1) Report on the National Survey, 1958; (2) Result of National Survey—forwarded per Secretariat.

New Members Elected.—Mr. R. H. Mitchell, Brisbane; Mr. L. Hall, Enoggera.

Pharmacy Board.—Mr. Martin reported on matters engaging the attention of the Board.

P.A.A. Adelaide Conference.—Consideration was then given to various remits to be considered at the Adelaide Conference at the end of May. Mr. Wells reported on the material he would be submitting in support of the remits tabled on behalf of this Society. He said the A.P.F. Sub-Committee had met, and for the information of the meeting, that Sub-Committee's recommendations were tabled concerning the A.P.F. and its more forceful introduction to the medical profession.

Mr. Mellick said he felt the material had been very well collated. The Council knew that its delegate, Mr. Wells, would use his discretion in voting to further the best interests of this State as he thought fit.

Annual Meeting.—Mr. Wells said it had been suggested that this year the annual meeting be held during Pharmacy Week, which is from September 11 to 18.

After discussion, other members of the Council agreed with this suggestion, and it was resolved that the annual meeting be held on September 15, consideration to be given at next meeting to a guest speaker for this function.

The meeting closed at 11.40 p.m.

THE GUILD

S.B.C. Meeting

The State Branch Committee of the Queensland Branch of the Guild met at 4 Wickham street, Brisbane, on May 7, at 7.45 p.m.

Present.—Messrs. C. A. Nichol (President), A. W. Eberhardt, W. E. Martin, F. H. Phillips, R. M. Ward, W. A. Lenehan, A. M. McFarlane, A. B. Chater, H. Darrouzet, and the Secretary.

Visitors.—Mr. R. Strain, Chairman of the South-East Zone, and Mr. J. S. Morrison, Secretary of the Redcliffe-Sandgate Zone. The President extended a sincere welcome to the Zone representatives. He and other members of the Committee were very pleased they could attend, and he invited them to join in discussion on any subject.

Welcome Back to Mr. Phillips.—The President said that he desired on behalf of the Committee and himself to extend a sincere welcome back to their old friend, Mr. Phillips. They missed him from last meeting and were pleased to see him looking more like himself, after the unpleasant episode he had experienced.

Sandgate-Redcliffe Zone.—The President reported that there were nineteen Guild members from the area present at Sandgate on April 14, when it was agreed to establish the zone. Mr. Eberhardt and Mr. Bell had accompanied him. Mr. P. Costiff of Banyo was elected Zone Chairman, and Mr. J. S. Morrison was appointed the Secretary. The first meeting of the Zone would be on May 12. The President said there was quite good general discussion at this meeting, and everything augured well for a successful zone in the area.

Visit to South-Burnett Zone.—The President reported that on April 26, Mr. Lenehan and Mr. Darrouzet accompanied him to the zone which met at Kingaroy. Mr. Ward, who was visiting Kingaroy, also attended the meeting. Every Guild member except one from the area was present at the meeting. The member who was not present was on holidays.

The President enumerated the various matters dis-

QUEENSLAND—Continued

cussed at the meeting. He said that the morning of the meeting was mainly taken up with the advertising and merchandising scheme. There was 100 per cent. endorsement of the plan as outlined. Discussion took place concerning the discount from chemists' monthly accounts to provide for financing of the scheme—whether this was to be $\frac{1}{2}$ per cent. or 1 per cent. Those present felt that $\frac{1}{2}$ per cent. would not be sufficient in a State like Queensland and they were very keen to proceed with the scheme on the basis of 1 per cent. This was a very successful meeting held in this area.

New Members Elected.—Nundah All-Night Pharmacy, Mrs. M. Magee, Mrs. N. M. Graham and Mr. L. M. Brosnan.

Correspondence.—To Federal Secretary, enquiring if representation could be made by Federal Office to the proper authority to ascertain if the number of tablets for prescribing under P.M.S. could be extended to 100 for Ferrous Gluconate and Ferrous Sulphate Tablets. —Reply advising the suggestion has been passed on to the Commonwealth Department of Health, Canberra, but the Advisory Committee will have to consider the matter, as it appears that nothing is altered unless the Minister has received advice from this Committee.

To a country member, advising that the Guild Committee agrees that pharmacy as a body should interest itself in scholarships when the Bachelor of Pharmacy training is in operation at the University. Advising that his correspondence is being passed on to the Society for its consideration.

To Mr. L. W. Huxham, advising the Committee was sorry to learn that he could not see his way clear to continue as a Committee member. They felt that he had given a good deal of consideration to this before reaching a decision, and in the circumstances the Committee accepted his resignation, albeit with regret, at the same time expressing appreciation of his services whilst a member of the Committee.

To Mr. K. Fittock, Secretary, South-East Guild Zone, advising the steps taken to ensure that the price quoted in future for Influenza Virus injection would be 9/9.

To Mr. F. V. Kunze, Secretary, Ipswich & West Moreton Zone, stating it would not be possible to have the letter "C" printed against such lines in the P.P. List to indicate that they were saleable over the counter without prescription, because there are not uniform poison regulations throughout the Commonwealth. Pointing out that the reprint of the "P.P. Guide" now in hand should give pharmacists the assistance and guidance they require in this direction.

To Mr. J. D. Carroll, Secretary, North-Eastern Guild Zone, advising that, although the Guild federally has fought hard to achieve more than 30 days' notice of price alterations or removals from the Pharmaceutical Benefits List, the ethical manufacturers would not concede this point. With regard to the February list and its late arrival, the Guild federally took up this matter with the Department of Health, Canberra, who advised that the late delivery of the booklet in some areas was due to circumstances beyond its control. However, State officers of the Department had been asked not to penalise chemists because of the late delivery of the book.

From Federal Secretary, forwarding the framed, coloured prints of the murals at Guild House, Melbourne, for hanging in the Queensland Office.

From Mr. R. G. Ross, Federal Merchandising Manager, advising the date of the Federal Trade and Commerce Conference will be August 3 and 4. Seeking the name of the Queensland delegate. Also advising that any remits for consideration at the Conference should

be to hand by May 22.—It was resolved that Mr. Delahunty be asked to represent Queensland at this Conference.

The President asked members to give consideration to any remits which they consider should be submitted for consideration at this meeting. Members were asked to contact either Mr. Delahunty or Mr. Edmiston concerning the remits.

From National Association of Pharmaceutical Students of Australia, forwarding the Survey of Pharmaceutical Students of Australia, 1958, and report on the National Survey.

The President said he would be pleased to peruse these and they would also be available for any other member's perusal.

List of branded vitamin products as prepared by the N.S.W. Branch was submitted for consideration. It was resolved that the matter be handed over to the Trade and Commerce Committee for consideration.

From Veterinary Research Officer, Sigma Co. Ltd., advising he would be visiting Brisbane from May 25 to 29, when he would be pleased to make contact with chemists who were interested in the sale of animal medicine.

The President said he felt this officer could not do a great deal to help in the Brisbane area. He felt that possibly his services might be of some assistance to chemists in the nearer country centres such as Gympie, South-Burnett area, Toowoomba, Ipswich-West Moreton district. It was resolved that the matter be referred to the zones for their consideration.

Federal Delegate's Report.—Mr. Martin recalled that this Branch had sent to Federal Office for its information a Superannuation Plan made possible by the B.M.A. in this State and also the A.M.P. Society. Mr. Martin said the Tasmanian Federal delegate had also submitted a plan of superannuation, and the questionnaire recently circularised to members was to find out how many would be interested in insuring for superannuation if the Guild proceeded with its enquiries.

Touching on merchandising matters, Mr. Martin enumerated correspondence he had received during the month from the Federal Merchandising Service. One particularly interesting letter was from Sterling Pharmaceuticals, and reported on the success of the Nyal February drive.

Pricing Officers' Report.—Mr. Chater reported that during the month a letter had been received from Mr. Reg. Fitzpatrick, who compiled the Fitzpatrick Calculator, pointing out that in the recent instructions issued by the Commonwealth Health Department it had recommended the use of 137 grains as the maximum limit for calculating off the 1 dram price instead of the previous figure of 120. Naturally, Mr. Chater said, the new Regulations had made the slide calculator inaccurate for some quantities between 120 and 137 grains. Mr. Chater said Mr. Fitzpatrick stated he was prepared to work out the alterations necessary to the inner sliding card of the price calculator if the Government insisted on leaving this new Regulation in force.

Mr. Lenehan said he felt the attention of Federal Office should be drawn to this point, and enquiries should be made of them as to whether they are making any necessary correction, or if they wish Mr. Fitzpatrick to do so. Alternatively, would they take the matter up direct with the Health Department.—The Committee resolved in accordance with Mr. Lenehan's suggestion.

Drugs Over the Counter List.—Mr. Chater said that following Mr. Huxham's resignation from the Committee, it would be necessary to appoint someone else to look after this price list. It was now due for a reprint.

QUEENSLAND—Continued

The President said he had telephoned Mr. Darrouzet enquiring if he would be able to take over the job, and he was happy to advise that Mr. Darrouzet would be very pleased to do so.

After discussion it was agreed that Mr. Chater and Mr. Darrouzet should confer concerning any pricing queries which might arise in connection with the compilation of the new Drugs Over the Counter List.

Mr. Chater said by now all members would have received a copy of the Thomas Table. He felt that the little explanation which accompanied the new table should be of some assistance to those who were a little in doubt concerning its workings.

Advertising and Merchandising.—In the absence of Mr. Delahunty, the President reported that there had been a meeting of the Action Committee on April 30, when it was decided to recommend that Nichols Cumming should submit a scheme for Queensland, based on 1 per cent. instead of $\frac{1}{2}$ per cent., because it was felt that with a vast State such as Queensland $\frac{1}{2}$ per cent. probably would not give as full a coverage as was necessary. Mr. Delahunty telephoned this advice to Mr. Ross, and it was agreed that, together with Mr. Watson, he should have discussion with Mr. Doorley of Nichols Cumming. Mr. Ross later advised that they planned to visit Brisbane on July 13, and depart on July 16. It was felt that possibly a meeting of the Action Committee could be held on the evening of July 14, and at this meeting representatives of all the suburban zones could be invited to attend. The President said that it was also proposed to extend an invitation to all country zones to be represented at this meeting, and to offer to pay travelling expenses and accommodation for one day and night in Brisbane.—The report was received.

Liaison Committee.—The President stated that this Committee had met on April 13. A copy of the minutes had been distributed to each member of the Committee, who thus would have gathered some idea of the discussion at that meeting.

Retail Pricing.—Mr. McFarlane reported on the main changes which had been agreed to on the Retail List, with the President's approval, as the outcome of the visit of Miss Linnane, New South Wales, to Brisbane towards the end of April. To give some idea of the changes, Mr. McFarlane mentioned that, like New South Wales, in future the Queensland List would incorporate on the front inside page the names of office-bearers and members of the State Branch Committee, together with the names of the members of the various Sub-Committees. A list of "Chemist Only" lines in Queensland would be printed on the spare page at the back of the book. All the photographic items through the main body of the list had been taken out, and they had been placed alongside Kodak in the photographic section at the back of the book.

Mr. McFarlane said one of the big changes was with Brushware. It was decided that all Brushes should be alphabetically listed under "Brushes." There would be a lot of deletions—lines that had not been used for some time.

Agenda For Adelaide Conference.—The President said that a copy of the agenda had been made available to all members prior to the meeting. He would go through the agenda and obtain the views of the Committee on the various remits so that they could be recorded, and he could vote accordingly at the Adelaide Conference.

Discussion then took place concerning the remits listed and the Delegate was instructed accordingly.

The meeting closed at 11.5 p.m.

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SOUTH AUSTRALIA

PERSONAL and GENERAL

State News

Members desiring publication of personal items of interest are invited to write or telephone details to the Journal Correspondent in S.A., Mr. E. F. Lipsham.

Mr. I. J. Evans has been appointed as Deputy Chief Pharmacist at the Royal Adelaide Hospital. His position at the Wallaroo Hospital has not been filled at the time of writing.

Mr. R. Beckinsale has resigned his position with Mr. C. Lyons at North Adelaide and will return to Victoria.

Mr. Peter Hislop, who came to us for a brief period from New South Wales, writes from Auburn, Sydney, to say: "I would like to thank all those with whom I came in contact in South Australia. Each one helped me, a stranger, as much as they could and much more than was expected. I met some wonderful people in pharmacy both in retail and wholesale spheres. My wife and I liked Adelaide very much. Some day we may return. We will certainly come back for a vacation."

Mrs. G. Potter assisted Mr. E. Hogben of Woodville at the end of April and beginning of May.

Mrs. K. Read took charge of her brother's (Mr. A. Lean) pharmacy for a short period during the month.

Mr. P. Argall spent three weeks in May assisting Mrs. Y. Phillips of Royston Park.

Mr. L. Woolford from the Mt. Gambier Hospital spent a fortnight in April at the Royal Adelaide and Queen Elizabeth Hospitals. Miss P. Lugg took his place in Mt. Gambier.

Miss Heather Smith embarked for England in the middle of April, leaving Miss H. Jenner in her stead as manageress of Gryst's Pharmacy, Kingswood.

Mr. Ian Fitzgerald is now managing Freemans—Chemists, Bank street, Adelaide.

Mr. J. Myers has opened a pharmacy in McInerney avenue, Mitchell Park, after assisting Mr. J. Measday and Mr. J. Maxwell for brief periods this month.

Mr. H. Giles has resigned from his position in the Pharmacy Department, Queen Elizabeth Hospital, to join the staff of Mr. W. Spencer in Lower North Adelaide.

Mr. L. Quintrell acted during May as relieving manager for Mr. P. Cox of Cambelltown and Mr. J. Maxwell of Hectorville. He is to assist the two Presidents, Mr. K. S. Porter (Board) of Albert Park, and Mr. D. Penhall (Society) of Royal Park, during Conference week.

Miss R. Hewett acted as relieving manageress for Mr. D. Standish of J. White & Son, North Adelaide, during the early part of May.

Mr. M. Abbott is assisting at the F.S.M.A., Port Adelaide. Mr. M. Bassett has now returned to duty after his illness.

Mr. G. Mathieson has registered as manager for Freemans—Chemists, Hindley street, in place of Mr. J. Mitchels, who is visiting England.

Mr. T. Young acted as locum for Mr. G. Searman of Magill for three weeks at the end of April.

Mr. Don Farley writes from London early in May that at last he is turning homeward and expects to arrive early in August. His route is to be via "Queen Mary" to New York and then pick up Bob Brice. The pair will then visit Quebec and then down to Detroit to pick up a new car. After "ferrying" across America they go up to Vancouver to embark on the "Oronsay" and thence the Pacific Islands, New Zealand and Sydney. At the time of writing Don was working in a large hospital in a slum area and enjoying the change from retail, particularly when called upon to dispense a prescription including Seppelts Chateau Tanunda brandy!

Mr. R. Batson is now assisting in the principal pharmacy of F.S.M.A. conducted in King William street, Adelaide.

Mrs. Avis Smith (nee Chapman) of Broken Hill has been in Adelaide for some weeks. She has assisted Mr. S. Chodowski (Warrens Pharmacy, John Martin & Co.) and Mr. P. Kiepert of Magill.

Mr. W. Harrison established himself in a new pharmacy on Kirkcaldy road, Grange, after acting as locum for Mr. M. Callaghan of North Salisbury at the end of May.

Mr. W. G. Meldrum visited Tumby Bay during the month to assist Mr. R. Hibble.

Miss V. Lazare has joined the Registers of both Victoria and New South Wales under the general reciprocal agreements.

Mr. D. L. Lenthall of Vickers Pharmacy, St. Peters, engaged Mr. L. Morton to act as manager for a month spread over April and May.

Mr. W. G. Collyer has assisted Mr. W. Ey of Warra-dale Park in recent weeks.

Mr. R. Turner has transferred from the Royal Adelaide Hospital to the new Pharmacy Department at the Queen Elizabeth Hospital.

Mr. J. Pledge is now managing the pharmacy conducted by Mr. J. C. Freeman in James place, Adelaide.

Mr. A. Cock spent the last three weeks in May as manager for Mr. G. Smylie of Hampstead Gardens.

Mr. D. Underwood relieved Mr. P. Windle of Walkerville in the middle of April.

Mr. W. Vivian visited Crystal Brook in the early part of May under engagement by Mr. K. Hosking.

MARRIAGES

Thompson-Bennett.—The marriage of Margaret, only daughter of Mr. and Mrs. F. C. Thompson, of Dunleath, to W. Harvey, eldest son of Mr. and Mrs. W. E. Bennett, of "Glen Aaron," Myponga was solemnised at Kent Town Methodist Church, on May 2.

Shanahan-Moriarty.—The marriage of Margaret Carmel, daughter of Mr. and Mrs. Thomas Shanahan, of Drumore, Freeling, to Vincent John, son of Mr. and Mrs. V. J. Moriarty, of Tusmore, was celebrated at Rostrevor College Chapel recently. The bride was attended by Miss Patricia Shanahan and Mrs. William Bertelsmeier.



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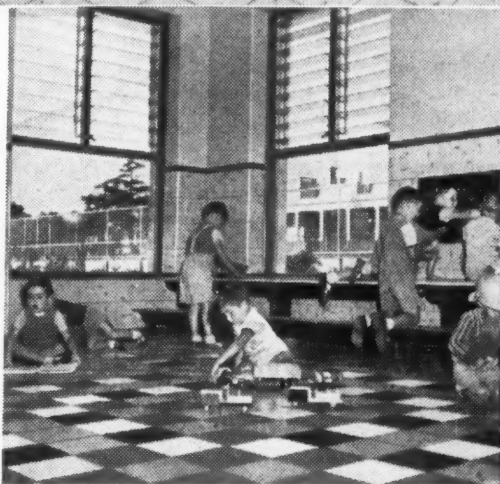
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SOUTH AUSTRALIA—Continued

BIRTHS

We offer congratulations to the following:—

Wandke.—To Wilma and Brenton, at Glenelg Community Hospital, on April 14—a son (Simon Charles).

Newbery.—To Lucy and Don, at Kadina Community Hospital, on April 12—a daughter (Jane Louise).

Hunt.—To Ruth and Laurence, at Q.E.M.H., on April 19—a daughter (Dianne Elizabeth).

DEATH

Anderson.—The death occurred on April 15 of Harold Anderson, 40 Wellington Square, North Adelaide. He is survived by a widow and one son, to whom we offer sincere sympathy.

SUICIDE ATTEMPT

Unsuccessful applications to have their names suppressed from publication were made by a youth and a girl charged with having attempted to commit suicide by taking tablets.

The Court was told that there was no link between the two cases. Elfriede Techno, 18, housemaid, admitted taking an overdose of sleeping tablets because "she had a row with her boy friend." Brian Trevor Colquhoun, 19, admitted having done likewise because "he had a row with his girl friend."

Each defendant was released on a £10 bond to be on good behaviour for twelve months.

FIGURES ON POISONING OF CHILDREN

In ten years to June, 1957, 2636 children were admitted to the Adelaide Children's Hospital suffering from the effects of poison, according to statistics given in the issue of "Good Health for South Australia." The report states that the poison in 1345 cases was a petroleum product. Three of those patients died.

Of 91 children who swallowed substances containing arsenic nine died.

Greatest danger appeared to be with children between nine months and two years.

"Good Health for South Australia," which is a quarterly bulletin of the South Australia Department of Public Health, said synthetic poisons more subtle than those of two decades ago are to be found today in solvents, polishing agents, insecticides and colouring matter.

A consultative service on poisons and antidotes is given to physicians, pharmaceutical chemists and parents by the Adelaide Children's Hospital Pharmacy, and, after hours, by the Chief Pharmaceutical Chemist, Mr. S. A. Downie, UW 1296.

In a warning to parents published in the press during the month the Assistant Superintendent of the Hospital, Dr. R. Wilson, reported that during two weeks an average of two children a day had been treated at the hospital after swallowing turpentine.

INQUIRY BY THE PHARMACY BOARD

Chemist Censured for Unprofessional Conduct

A special meeting of the Pharmacy Board of South Australia was held on April 20, 1959, to inquire into alleged unprofessional conduct of Edward Francis Williams, a registered pharmaceutical chemist, of Penola.

It was alleged that he had submitted to the Com-

monwealth Department of Health for payment some prescriptions covering the supply of pharmaceutical benefits during the months of September, 1956, to April, 1957 (both months inclusive), which prescriptions were false and/or misleading in a particular contrary to the provisions of the National Health Act and Regulations. Mr. Williams had been reprimanded by the Minister of State for Health in respect of the offence, and the reprimand had been made public by insertion of a notice signed by the Minister in the Commonwealth Government Gazette of December 11, 1958.

The Board found Mr. Williams guilty of unprofessional conduct in respect of the charge which had been laid, and resolved that he should be censured. He was ordered to pay the legal costs and expenses of the inquiry, amounting to £32/15/-, within thirty days from the date of the hearing.

THE NEW SENIOR LECTURER

Late April brought a joint statement by the University of Adelaide and the Council of the Pharmaceutical Society of South Australia about the appointment of **Mr. Bruce Leslie Reynolds** as Head of the Pharmacy Department of the University in place of the present holder, Mr. E. F. Lipsham, who will retire at the end of the year.



Mr. B. L. Reynolds

Mr. Reynolds is to come to us from his present position as Lecturer in Pharmacy at Rhodes University, Grahamstown, South Africa, which city is near the sea (about 40 miles) and nearly mid-way between Cape Town on the south and Durban on the east coast.

He is not expected to reach Adelaide until well into October because of the time needed before release from his present position and because of the difficulty in crossing the Indian Ocean with his wife and small children, a boy of 8-9 years and an infant girl. He writes:



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SOUTH AUSTRALIA—Continued

"There is difficulty in booking passages from the Union to Australia in the Shaw Savill Line. Sailings are infrequent and the boats are fully booked up for a long time. The alternative route—Durban-Colombo-Australia is expensive and not attractive. Flying direct from Johannesburg to Perth appears to be the most promising method of transport."

Coming now to some personal details:

Mr. Reynolds obtained his secondary education at St. Marylebone Grammar School in London and then worked for three years as an apprentice of Phillip Morris & Co., manufacturing chemists of Birmingham, in Warwickshire. He then entered the Chelsea School of Pharmacy within the big Polytechnic known as the Chelsea College of Science and Technology, London.

In 1944 Mr. Reynolds graduated as Bachelor of Pharmacy. Chelsea School is recognised by the University of London for degree students, and also by the Pharmaceutical Society for both intermediate and final courses for the title of Pharmaceutical Chemist.

Mr. Reynolds then joined the staff of the research laboratories conducted by the British Pharmacopoea Commission for a couple of years and during that time completed the examination in Forensic Pharmacy, which enabled him to obtain his Diploma as a pharmaceutical chemist in 1945, and so join the Register of Pharmacists of the United Kingdom.

Returning in 1946 to the Chelsea School of Pharmacy as a Specialist Lecturer, Mr. Reynolds spent the next nine years with Mr. C. Morton (Principal) and his staff of approximately 15 lecturers.

Around 1954 a Senior Lectureship in Pharmacy became vacant in the Pharmacy Department of the Technical College in Johannesburg, Transvaal, South Africa, and Mr. Reynolds was given the position.

Johannesburg is a very large city of over a million inhabitants, which sets the economic and industrial pace for South Africa and has all the amenities of a great cosmopolitan city.

Mr. Reynolds writes: "Since leaving Chelsea I have taught over a very wide spectrum, a useful and enjoyable experience. I have also gleaned from 'The Australian Journal of Pharmacy' a general understanding of the teaching and examination methods in Australia. I have perused a calendar of the University of Adelaide, noting the pharmacy course, and found some difference in content and emphasis from those of the United Kingdom and of South African syllabi, which is a refreshing aspect."

In 1958 Mr. Reynolds moved from Johannesburg in the northerly Transvaal Province, to Rhodes University, situated in Grahamstown, in the southerly Cape Province. His move coincided with the major change in the South African system of education for pharmacists, namely, from that of technical colleges and apprenticeships to a three year full-time degree course within the universities, followed by a year of practical experience in the pharmacies.

Grahamstown, the capital city of Cape Province, was established in 1812. Compared with Adelaide it has a quite small population, but unlike our capital the surrounding country supports a large number of people. It is a city of tree-lined streets and excellent vistas as well as being an important educational and cultural centre within the Union, because of the large number of schools and training colleges, in addition to the Rhodes University, which are founded therein.

Whilst at Chelsea, Mr. Reynolds published in the "Journal of Science and Chemical Industry" a paper on

"The Preparation of 4-amino Salicylic Acid From Phenyl Acetic Acid" and also in the "Alchemist" one entitled "Some Uses of Statistics in Pharmacy."

To "The South African Pharmaceutical Journal" he has contributed articles on "Surface Active Agents in Pharmaceutical Formulation" and also "Methods of Prolonged Medication."

At the present time he is engaged on an investigation of the glycosides of *Pachypodium Bispnosum*, which is plant growth of South Africa.

Mr. B. L. Reynolds comes to us with a very high reputation as a lecturer, well capable of presenting his subject matter and of holding the interest of students.

PHARMACY BOARD

Monthly Meeting

The Pharmacy Board of South Australia met at 27 Grenfell street, Adelaide, on April 15, at 7.45 p.m.

Present.—Mr. K. S. Porter (President) in the Chair, Messrs. G. L. Burns, L. A. Craig, D. C. Hill, E. F. Lipsham, B. F. Mildren and R. C. McCarthy and the Registrar.

Correspondence.—To Mrs. A. A. Cotton, expressing sympathy in recent bereavement in the death of her husband, former inspector, Mr. R. Cotton.

Copy of Poisons and Medical Acts 1958 and counter card of restricted drugs received from the Pharmacy Board of Victoria. Mr. McCarthy agreed to report on such to the May meeting.

Sellotape Offer:

From Sellotape (Aust.) Pty. Ltd., forwarding a sample of Selloprint with the wording "Keep out of reach of children" and asking for opinion of Board on distribution of such. A member reported that a personal approach by representatives of the company had been made to him as an officer of the Department of Public Health and he had explained the present position in South Australia. The requirement for affixing such a notice as referred to was only in force in Queensland, where the relevant provision was contained in recent legislation. It was resolved that Sellotape (Aust.) Pty. Ltd. be advised that the use of the tape in South Australia could not be implemented satisfactorily until the definition of when to use such was laid down by law.

Application for Re-registration:

Application was received from a former pharmaceutical chemist for annulment of cancellation of registration under Section 19 of the Pharmacy Act. The application was considered and it was noted that no additional evidence was produced. It was then resolved that the application seeking annulment of cancellation of registration be refused because no additional evidence in support was produced.

Apprentices.—Galenicals: Letters to six apprentices asking them to appear before a representative of the Board regarding their galenicals and letters of advice to their masters. Mr. Mildren, as a representative of the Board, reported on the interviews and the necessary action was authorised in each case.

Mr. Lipsham advised that he would not be in a position to carry out the physical side of correction of Set III due on May 5, but was prepared to supervise the work after the primary marking had been completed. It was then resolved that Mr. Graham Lee be appointed checker for examining galenical exercises and note books due for delivery in 1959, such work

SOUTH AUSTRALIA—Continued

to be carried out under the supervision of the Senior Lecturer, Mr. Lipsham.

Letter from Mr. E. E. Hogben advising Mr. T. R. Champion (his apprentice) has decided to withdraw from the course and wishes to have indentures cancelled by mutual consent. The Registrar reported that after Mr. Hogben had been informed by telephone of the procedure, the indentures had been returned and would be dealt with later in this meeting.

Finance.—Accounts totalling £13/3/- were passed for payment.

Inspections.—The Registrar submitted current report on inspections and actions as a result of the inspector's reports. The reports were received and the necessary action authorised.

P.A.A. Conference.—The President submitted a report on developments since the last meeting of the Board.

A preliminary copy of agenda for both Open Conference and Conference of Boards was tabled for the information of members.

PHARMACEUTICAL SOCIETY

Council Meeting

The Council of the Pharmaceutical Society of South Australia met at 27 Grenfell Street, Adelaide, on May 5, at 7.45 p.m.

Present.—Mr. D. F. J. Penhall (President) in the Chair, Messrs. K. D. Johnson, E. F. Lipsham, K. G. Phelps, J. R. Pickering and Miss Z. M. Walsh and the Secretary.

The President extended a welcome to Mr. K. G. Phelps, who had been appointed to fill the casual vacancy caused by the retirement of Mr. A. A. Russell. The appointment was made by the Council in accordance with the rules of the Society. The Vice-President, Mr. Johnson, stated that it gave him great pleasure to see Mr. Phelps at the Council table and the ready manner in which he had accepted the Council's invitation to join that body. He felt sure that Mr. Phelps would become an invaluable member of the Council and he looked forward to association with him in deliberations.

Correspondence.—To Mr. A. A. Russell, conveying formal acceptance of resignation with regret.

To Mr. L. Johnson, expressing sympathy in recent bereavement (father).

To Mr. R. Currie, expressing sympathy in recent bereavement (father).

To Mrs. D. Anderson, expressing sympathy in recent bereavement (husband).

National Survey of Pharmaceutical Students of Australia, 1958, from the Federal Pharmaceutical Public Relations Secretariat.

From P.A.A., forwarding copies of the H. W. Woods Travelling Scholarship announcement.

Finance.—Accounts totalling £660/4/11 were passed for payment.

P.A.A. Conference.—The President submitted a progress report on activities of the Conference Committee since the April meeting.

Consideration was given to the items contained in the

agenda forwarded by P.A.A. and the President, in his position as voting delegate, noted the wishes of members wherever possible.

Post-graduate Sessions.—Liquor permit from the Registrar of the University of Adelaide for June 30, in the Staff Club Room. Miss Z. M. Walsh stated that she would submit a progress report to the June meeting.

Perth A.N.Z.A.A.S.—Letter to the Hon. General Secretary, advising that the Council is hopeful of a delegate attending the Perth Conference, but not yet in a position to make the appointment. The Secretary was directed to place this item on the agenda for consideration at the June meeting.

New Member Elected.—Mr. B. R. Kaehne.

Group Decreasing Temporary Assurance.—After receiving reports from the President and Mr. Pickering, it was decided not to proceed further in this matter.

Function for Newly Qualified Members.—Letters to newly qualified people and members who had subscribed, advising cancellation.

The President and Secretary made statements on matters leading up to the decision to cancel the function arranged to be held in the Delphic on April 23, due to lack of support.

Mr. Lipsham moved that there shall be a complimentary dinner in June to newly qualified members, provided that a sufficient number of invitees accept the invitation by a specified date, the invitations to older members to be limited to members of the Council of the Society and Pharmacy Board and the masters of newly-qualifieds, and that such older members subscribe to the function in the usual manner. After discussion, the motion lapsed for want of a seconder.

It was then resolved that awards and medals and, if possible, Standard Certificates be presented at the annual general meeting of members in August, which is to be modified accordingly.

The Secretary was directed to advise the Pharmacy Board formally of the decision regarding standard certificates and ask for information on the decision which it makes regarding the distribution of such.

Members generally expressed regret that it had been found necessary to cancel the function, and it was resolved that this Council strongly supports the idea of a special function for newly qualified members, but stresses the need for support by members of the Society.

Annual Meeting.—It was resolved that the annual general meeting of the Society be held in Pennington Hall, North Adelaide, on a suitable night in the last week in August, to be ascertained by the Secretary after consultation with other pharmaceutical bodies.

Annual Election.—Letter from the Returning Officer, advising that at the close of nominations for Councillors, the following three names were received: Messrs. R. B. Martin, D. F. J. Penhall and K. G. Phelps. He therefore declared that the three members were duly elected for the ensuing two years.

Hospital Pharmacists.—Letter to Mr. G. L. Burns, Chief Pharmacist, Royal Adelaide Hospital, regarding change from white coats.

The Secretary stated that he had discussed the matter by telephone with Mr. Burns, who said that he was not permitted officially to answer the letter, and in any case the change from white to cream coats for pharmacists had been approved.

It was then resolved that a letter be forwarded to the Royal Adelaide Hospital, expressing disappointment at the change from the traditional white coats of pharmacists, as such was recognised throughout the world.

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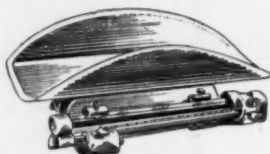


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